

Baltimore, Md. Nat-
ional and Hicks.
U. S. General Hospital.
Ante Mortens and
Post Mortens.



U.S. Army, National Hospital
Baltimore
OBSERVATION BOOK.

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Ante Mortems and Post Mortems.

ANTE MORTEM BY

MEDICAL OFFICERS OF WARDS;

POST MORTEM BY

THE SURGEON IN CHARGE.

NATIONAL AND HICKS

United States Army General Hospitals,
BALTIMORE, MARYLAND.



BALTIMORE, MD.

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OBSERVATION BOOK.

ANTE AND POST MORTEM.

[CASE No. 1.]

HOSPITAL NUMBER, }
2,484. }

Demarcus Ward, aged 19 years; Corporal Co. H, 13th Va. Regiment.
Was admitted to this Hospital from the field Oct. 28th, 1864.

HISTORY.—(ANTE MORTEM.)

Patient when admitted was in an anæmic condition. The femur protruded from the stump about one-half inch. Suppuration in the cellular tissue of the thigh, as far up as the great trochanter, had ensued. Incisions were made at several times, large quantities of pus escaping each time. The operation of resection was postponed until the patient's condition was sufficiently improved to permit it which was performed Dec. 30th, 1864, removing about four inches of the femur. On the 15th of January, 1865, symptoms of pyæmia set in, which increased until the patient died on the following day.

Case reported by

W. G. SMULL,

A. A. Surgeon U. S. A.

*Amputated 1-30-1865
W. G. Smull.*

POST MORTEM,

Number of hours after death unknown.

Patient emaciated. Having made the usual incisions, dissected back the pectoral muscles and removed the sternum with the cartilaginous portions of the ribs, some pleuritic effusion in the left sac was observed.

BRAIN.—Slight opacity of the arachnoid, inner surface of; veins of pia mater covering the cerebrum were filled with blood; small quantity of reddish serum in lateral ventricles; choroid plexuses rather pale; commissures third ventricle in a normal state. Near the nib of calamus scriptorius a V-shaped congestion was detected somewhat rough to the feel; congestion of the pons similar to or slightly in excess of that observed in substance of cerebrum.

LUNGS.—Carnified on left side, lower lobe; some hypostatic congestion on right side.

HEART.—Large fibrinous clot in right ventricle, extending from auricle, closely adherent to valve; also small clot in left ventricle near the valve.

LIVER.—One fourth larger than natural; heavier, rather light colored, of finely granulated appearance and quite solid consistence.

SPLEEN.—Three shades too dark, presenting a dark purple appearance; twice the natural size, presenting at middle posterior border two fibrinous (exudation) masses about the size of a chestnut, the superior the larger; the lower presented some pus.

KIDNEYS.—Of natural size and light color.

STOMACH—Abnormally large.

INTESTINES.—Several mesenteric glands enlarged; the intestinal canal natural.

RIGHT THIGH, SUPER. THIRD.—Upon dissecting the tissues they were found to be flabby, otherwise natural, end of femur denuded of periosteum for one inch, and periosteum peeled off readily some distance upwards.

FEMORAL VEIN.—Examined and found occupied at extremity by white elastic thromb two inches long. Examination obscure; no acute inflammation observed.

FEMORAL ARTERY.—A clot five lines long was found from the occlusion to its distal branch; in other respects healthy.

Specimen preserved.

[CASE No. 2.]

HOSPITAL NUMBER, }
 . 30. }

C. B. Kittle, aged 32 years; Private, 10th Wisconsin Battery. Was admitted to this Hospital from the Medical Director's Office January 10th, 1865.

HISTORY.—(ANTE MORTEM.)

DIARRHŒA.—Extremely irritable stomach, and pain in the right iliac fossa. Was treated with turpentine and supportives with temporary relief. About the third day after admission he had low fever, with muttering delirium at night; some fine crepitation, not very distinct, was observed over the right lung anteriorly, lower lobe; had slight cough; diarrhœa increased and death ensued on the 17th of January.

Case reported by

J. G. KELLER,

A. A. Surgeon, U. S. A.

 POST MORTEM,

Patient emaciated. Right side of chest one fourth greater in size anteriorly than left. In right iliac region, posterior part of cæcum, to right of mesenteric band, connecting ascending colon with the abdominal wall, adhesions were observed. Upon traction these gave way and revealed a perforation, escape from which had been prevented by them. A small opening was found in the iliac fascia, communicating with division of the iliac and psoas muscles, in which there was a small collection of dark colored, offensive, caseous, puruloid material estimated at two fluid ounces. The extension of this collection was upwards, over crest of the ilium upon the lumbar fascia towards the origin of psoas muscle. The abscess terminated inferiorly in a cul-de-sac in advance of the iliac muscle under iliac fascia opposite anterior inferior spinous process.

LUNGS.—Lowest lobe right lung hepatized red; posterior third of uppermost lobe same; central portion lower lobe left side same. When this hepatized part of lung substance was broken and pressed, a grayish puruloid fluid was expressed abundantly.

LIVER.—One-fourth larger than natural and ingested with blood; anterior inferior portion of right lobe presented a region of black congestion.

KIDNEYS.—Of pale color, and presented irregular cherry colored congestion inferiorly.

Inflammatory spots connected with ulceration and associated with softenings were observed in the large intestines and lower portion of ileum, with great thinning and wasting of the mucous membrane.

SPLEEN.—Solid, of natural size, with black congestion on anterior and inferior border. Substance of normal consistence; a little hard.

BRAIN.—Normal.

Specimens of cæcum and ascending colon preserved.

[CASE NO. 3.]

HOSPITAL NUMBER, }
37. }

James York, aged 30 years; Private, Co. —, 13th Indiana Infantry. Was admitted from Provost Marshal's, Jan. 14th, 1865.

HISTORY.—(ANTE MORTEM.)

Patient walked into Hospital, gave his name and regiment, and told how his name was spelt. He presented a somewhat stupid expression of countenance. No history of case could be obtained, except that he had been sick only a short time. About noon he became restless and crazy, rolling and tossing

about in bed and attempting to get up, requiring two men to restrain him. His eyes were somewhat injected; pupils rather dilated, but responded to the action of light. Pulse frequent and full, but soft. He could not be made to utter an articulated word. He appeared to suffer pain in the abdomen, and shrank from pressure especially over the right iliac fossa. The lungs could not be satisfactorily examined on account of his extreme restlessness, but no marked abnormal sounds were heard. Counter irritation was made at the back of the neck, and a terebinthinate injection administered, which was not returned until several hours afterwards. During the night his condition remained about the same; occasionally he was quiet for a few moments, but most of the time rolling about from side to side and making violent efforts to get up. A sheet was tied across his body to the sides of the bed. Next morning (Sunday) he was more quiet, and there seemed to be rather more intelligence in the expression of his eyes. Sometimes he appeared to partially comprehend a question and answered it by a nod. His tongue and throat were covered with sordes; his pulse was rather softer and weaker; the pupils natural or a little contracted. Some ecchymosis was observed over his arms, chest and abdomen, which was ascribed to friction against the sheet tied across him. About three pints of urine, natural in appearance, were drawn off. He swallowed, with great difficulty, a little beef essence. Beef essence and quinine were ordered per anum; turpentine emulsion, milk punch and beef essence internally. Deglutition was very difficult, but he occasionally swallowed small quantities of fluids. Late in the afternoon he became worse, more heavy and comatose, with some stertor in breathing. The power of deglutition was entirely lost. He was quiet during the night with occasional restlessness. His bowels and bladder were several times involuntarily evacuated. When seen the following (Monday) morning the patient was evidently sinking; the stertor was well marked, with puffing expansion. A number of different sized blotches, resembling purpura hemorrhagica, and some small pinkish spots were observed over the lower part of the chest and abdomen. Their diagnosis was obscured from the fact that the man during his violent struggle had, for forty-eight hours, been rubbing his body against the sheet with which he was fastened in bed.

During the day paralysis of the right side was observed. The man frequently moved the left arm or leg, but never the right. Some contraction of the flexor muscles on the right side had been previously noticed. He sank slowly and died at 3 o'clock, A. M., January 18th, 1865.

Case reported by

G. H. DARE,

A. A. Surg., U. S. A.

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POST MORTEM.

Twelve hours after death.

BRAIN.—Veins of pia mater very full of blood; also, fine injection of same membrane observed. Dura mater was remarkably adherent to the summits of cerebrum and was somewhat congested. White substance of cerebra three times as full of blood, by estimation, as natural, and of pinkish color on cut surface. Pia mater firmly adherent to cerebral surface. Its covering of arachnoid had lost its transparency. Fluid found in lateral ventricles. Veins of choroid plexus distended. Fluid resembling pus was observed about the greater hippocampus, of the right side. The lining membrane of posterior horn of right lateral ventricle much congested and veins enlarged. Veins of velum interpositum exhibited small fibrinous granules. Third ventricle contained serum. Fourth ventricle was covered with what was considered plastic exudation, and exhibited small quantities of puruloid fluid, the former so marked as entirely to obscure the usually shining surface.* Pineal body presented a gelatinous appearance and was of three times the natural size. It was preserved.

LUNGS.—Lower lobe, left side, congested intensely, and so filled with products of inflammatory reaction that a portion one-and-a-half inches square readily sank in water. Supposed at first to be in the first stage of pneumonitis; this character not established.

Lobulated solidification was observed in lower lobe of right

*—The serous lining of the ventricles generally was opacified.—
Remark made two days after Post Mortem.

side.—HEART, natural size. Tenacious and well formed, white fibrinous clots observed in both ventricles; that of right side connected with tough, mixed, fibrinous clot in right auricle.

LIVER full of blood; not much enlarged.

GALL.—Bladder full.

SPLEEN, normal size, rather pale externally, in view of liver, lungs and heart.

KIDNEYS, normal size and full of blood, in common with other internal organs.

BLADDER filled. The congestions of the lungs were more allied to an apoplectic condition than a pneumonic. Urine was not examined for albumen.

BLOOD was fluid and of a dark brick red color.†

[CASE No. 4.]

HOSPITAL NUMBER }
2,739. }

John Keul, age 26, Priv. Co, K. 199th Pa. Vol's.; was admitted to this Hospital Dec. 2nd, 1864, and died Jan. 23rd, 1865.

HISTORY.—(ANTE MORTEM.)

Patient came into Hospital with typhoid symptoms, dry tongue and partial coma. Was placed under the ordinary treatment of Emulsion Terebinth, beef essence and typhoid diet. Chronic diarrhoea supervened, and continued from time to time, until death. His mental faculties were never clear from the time of his admission.

Case reported by

W. G. SMULL.

A. A. Surg. U. S. A.

POST MORTEM.

Jan. 23rd 1865, at 3 o'clock, P. M.

Nine hours after death. Slight rigor mortis. Considerable emaciation. Fluid in sac of pericardium, estimated at two oz. Adhesion upper lobe, left lung, about two thirds. Some slight

† Remark made from memory six weeks after autopsy.

adhesions (band) to diaphragm. Blood clotted in the great veins.

LUNGS.—Dark color, hypostatically congested. The outer portion of lowest lobe, right lung, was so congested as to be of nearly the specific gravity of water; doughy to feel, yielding, when pressed. Bloody serum. Posterior surface, left lung in which the bands were observed, was "euirassed" *

HEART.—Organ small, contracted upon white fibrinous clots, extending on the right side of heart, from the right auricular appendix through the ant. ventr. opening, firmly adherent to the two ant. cusps of the tricuspid valves, and sending an arm from these cusps upwards into the pulmonary artery. Opposite the valves of the pulmonary artery, clot-cars were observed. In the left side a clot corresponded firmly adherent to the ant. face of the mitral valve, after issuing from the auricle, and extending by arms into the *aorta*. Opposite, semilunar valves clot-cars were observed.

LIVER.—Rather small, vessels on surface marked with lines. Organ of solid consistence (hard) with a somewhat wavering border. Color an ash red.

GALL.—Bladder contained light colored bile. Over surface of liver there was fine arborescent congestion. Great vessels of organ well marked and strong, and its substance had a decided order.

SPLEEN, nearly normal size, a little larger, very dark color; full of blood; tough and presenting no variation in structure.

BRAIN.—On opening meninges about an ounce of serum escaped. Yellowish serum present, a drachm, (minimum estimated) in each of the lateral ventricles. Substance of cerebellum had a watery look. The whole brain was flaccid. Demonstration of organs was easy and perfect. There was a small quantity of fluid in the fourth (4th) ventricle. Communication between the ventricles was unusually large.

INTESTINES.—Upper part of rectum studded with small ulcers with white tops. Inferior portion of sigmoid flexure presented same appearance; transverse colon exhibited wasting of mucous membrane; right hypochondriac region, along posterior band collection of ulcers; long diameter of individual ulcers transverse;

* Meaning, made red tough, fibrous, leathery, somewhat elastic—not easily broken by pressure.

cæcum and ascending colon slightly congested in large spots and mucous membrane wasted. Iliac congestion near cæcal valve; congested spot eighteen (18) inches up; such congested spots continued throughout ileum, met with tho. rare in jejunum. Jejunum in upper portion apparently healthy. Spots of apparent softening of mucous membrane were rare; *duodenum* marked with bile.

STOMACH, flaccid; grayish internally.

KIDNEYS, left congested; darkly, inferiorly and externally, this superficially about one eighth inch deep; general congestion of substance of kidney; distinguishing line between the cortical and medullary part indistinctly marked. Right *kidney* presented same appearance, except that the general congestion was of a deeper hue. Urine slightly albuminous.

[CASE No. 5.]

HOSPITAL NUMBER, }
2,884. }

John Burke, Private, Co. I, 1st New York Lincoln Cavalry; aged 23 years. Admitted to this Hospital December 26th, 1864.

HISTORY.—(ANTE MORTEM.)

Patient was unmarried; by occupation, a laborer. Was subject to frequent colds, resulting in obstinate coughs. Patient took a severe cold in October 1864, while on picket duty; was admitted into Regimental Hospital, and afterwards transferred to this Hospital December 26th, 1864. Consumption not hereditary in his family.

December 27th 1864.—Suffers much from cough. Dyspnœa.

Pulse weak, but regular; bowels regular.

Appetite poor. Aphonia, much debilitated.

TREATMENT.—Gave expectorants. Opiates at night; brandy.

December 30th. The lungs were examined to-day.

INSPECTION.—Sternum prominent; the sides of thorax flattened; right side somewhat more than left. Ribs prominent.

PERCUSSION.—“Cracked Pot” sound on upper part of right lung. Dullness below. Upper part of left lung somewhat tympanitic; normal below.

ASCUATION.—Tinnitus metallicus on right side, upper part. Gargouillement rattling sounds in upper part of left lung, lower part normal.

DIAGNOSIS.—*Phthisis Pulmonalis*: both lungs affected, particularly the right, a cavern on upper part of right side, probably one also on left side.

Treatment continued.

January 5th, 1865.—No change.

“ 10, “ Somewhat better to-day. Treatment continued, with addition of Cod liver oil.

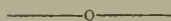
January 15th, 1865.—Not so well to-day. Diarrhœa. Cod liver oil discontinued because it nauseated him. Only opiates and stimulants.

January 20th.—Diarrhœa stopped, bloody sputa, becoming weaker. Dyspnœa increased.

January 25th.—Failing rapidly.

“ 29th.—Died at 2 o'clock, P. M.

Case reported by J. G. KELLER,
A. A. Surgeon, U. S. A.



POST MORTEM,

January 30th, at 3 o'clock P. M.—Height, six feet; body generally well formed; some rigidity.

LUNGS.—Extensive, firm and old pleurisy bands connected the surfaces (opposing) of right pleural sac. None observed on left. Bronchial tubes reddened. Mucous membrane roughened. On right side tubes connected by open mouths of third branch, with a vomica of irregular form, which was excavated in the consolidated substance of all the uppermost lobe, having its walls of a bluish gray color, lightly colored with puruloid fluid. No odor.

In middle and lower lobes of right lung a large number of vomicæ, varying in size from one capable of containing a pea, to one of the size of a hickory nut were observed, and were so numerous, indeed, as to make a central cut surface present a honey-comb appearance. Tubercles in all stages, from a miliary tubercle of pearl color, to the broken-down collection in a recent vomica, were observed. Very little of right lung; not

more, in fact, than substance corresponding in quantity with one half mid. lobe was available for purposes of function.

Right lung weighed three and a half pounds, ($3\frac{1}{2}$ lbs.)

In left side, sup. part, upper lobe, a vomica that would contain a hen's egg was observed, freely connecting with bronchus of one-fourth diameter. In post. part of this lobe and post. part lower lobe, as in right lung, great numbers of small vomica with tubercles (of miliary type) were observed; the stages of these seemed to be more advanced than the stages of those of right side. The large vomica was clean walled and oderless.

The general size of these lungs was that of the lungs two-thirds ($\frac{2}{3}$) inflated.*

Left lung weighed three pounds and seven ounces (3 lbs 7 oz.)

HEART.—In right auricle a central massive clot was attached to the auricular appendix, and had three arms, one running into either cava, a third connecting with a white fibrinous clot in the right ventricle which was firmly attached to tricuspid valve, connected with the tendinous cords of anterior surface of ventricle and which had an arm extending into pulmonary artery, ear marked opposite valves; bifurcating. In left ventricle a clot connected by a slender band with left auricular appendix, arose from the surface of anterior cusp, extended downward to be firmly attached to borders of ventricle, so that blood coming from auricle passed on the sides of the valves' opening; an arm extended from the ant. portion of the cusp attachment of this clot into the aorta; ear marked opposite valves by slender ear marks indistinct and stretched.

Heart weighed 11 ounces and 7 drachms.

LIVER of firmer texture and well filled with blood, not congested; homogeneous and having a strong peculiar odor.

Liver weighed 4 pounds and 5 ounces.

KIDNEYS rather large, of firm consistence and well developed cortical substance; pelvis somewhat dilated.

Each weighed $7\frac{1}{2}$ ounces.

SPLEEN.—Small, presenting one spot of superficial black congestion. Weighed $4\frac{1}{2}$ ounces.

* NOTE. Appearances would lead one to suppose that the older disease was on the left side from (1) the darker color of a cut surface, and (2) the more advanced condition of the tubercles; while the existence of a larger vomica and of pleuritic bands bear testimony in this favor for the right side.

INTESTINES.—Duodenum, jejunum (lower part,) and ileum congested in points, probably about the solitary glands. In opening, the gut was easily torn. In upper part of ileum tubercles were seen, yellowish gray, not ulcerated. Peyers patches tuberculous. Towards the lower part of gut tuberculous matter had softened, and a caseous substance was expressible from some of the little tumors. Spots of ulceration began in transverse *colon* and extended to rectum. Increasing intensity of ulceration towards rectum, varying from single round ulcer slightly raised, of pale color, to a large intensely red, well raised graulating surface. In rectum there was deep purplish congestion with ulceration. Weighed 58½ ounces.

BRAIN.—Nothing unusual observed, except distention of veins in lateral ventricle.

[CASE No. 6.]

HOSPITAL NUMBER, }
67. }

Jacob Gillman, Private, 18th Wisconsin Volunteers. Admitted for burial January 31st, 1865. Case one of death by R. R. accident, Particulars unknown.

POST MORTEM.

January 31st, 1865, at 3 P. M.

Extensive fracture of back of skull, Fracture observed in the occipital bone, extending from left transverse process, through left arm of occipital cross, to near apex or summit of bone. A line of fracture extended from near centre of postr. border of *foramen magnum* half way to Torcular Herophili, thence at right angles, serrated twice, half inch to left; line of fracture was also seen in mastoid portion of temporal bone. postr. portion, proceeding upwards and forwards.

BRAIN.—On opening the meninges a quantity of blood, black and clotted, flowed from both sides.

VEINS of *pia mater* greatly distended and appeared to have given way at postr. fourth of supr. borders of cerebra, near attachment of Pacchionian bodies. Blood was seen to issue on right cerebrum, in one of these locations, from an orifice

of a vein (clearly demonstrated,) through the *arachnoid*. Underneath the arachnoid an apoplectic spot was observed on surface of right cerebrum near outer termination of fissure of Sylvius. In removing the brain from bony case a clot of blood was observed in front of optic commissure, another clot observed near perforated space to outside of right optic tract just above the commissure. As to substance of brain the puncta were somewhat more numerous than usual. A clot of blood was also observed in antr. part of left lateral ventricle, semi-fluid. Large vessels, chiefly on right side, were observed in floor of fourth (4th) ventricle.

HEART.—White fibrinous clot was observed in right ventricle connected with one in right auricle; an arm of the former extended into pulmonary artery and was marked opposite pulmonary valves with ears. Auricular clot had its origin in auricular appendage; clot easily detached. On left side of heart, left ventricle, clot extending from infr. border of antr. cusp was attached to tendinous cords near apex; divided left ventricle into antr. and postr. chambers.

Heart weighed 10 ounces.

LUNGS.—Left lung intensely congested in postr. portion of postr. lobe, substance was black and friable and detached portions sank in water. When broken up a frothy, blackish fluid was expressed. Right lung, postr. portion, lowest lobe congested in a similar manner (as in left side.) less intensely and extensively.

Left lung weighed 29 ounces. Right lung weighed 26½ ounces.

INTESTINES.—Colic glands, somewhat congested. Solitary glands somewhat enlarged; otherwise intestines normal. In stomach (fundus of,) a reticular congestion observed apparently sub-mucous.

NOTE.—No accurate history of this man's injuries could be ascertained, he was, however, living at the time of reception of the order of admission, by the statement of the Officer giving order. So it was evident that he must have lived twelve hours or thereabouts, having been injured the night before, and brought from where the accident occurred to this city, (Baltimore, Md.) The fact of well defined clots having been formed after rupture of veins of pia mater in consequence of contrecoup affecting the conglomerate of meninges resulting from the action of the Paccubonian bodies shows that the man did not die instantly.

KIDNEYS.—Of natural size, congested sufficiently to present a bright red hue.

Left kidney weighed 4 ounces and 2 drachms. Right kidney weighed 3 ounces and 2 drachms.

SPLEEN.—Normal; some difference of color in different portions; change supposed to be *post mortem*.

Spleen weighed 6 ounces and 8 drachms.

PANCREAS.—Normal. Weight, ~~29 pounds~~³ and ~~4~~ ounces.

[CASE No. 7.]

HOSPITAL NUMBER, }
2,797.. }

John Jordan, aged 30; Private, Co. H, 173d Regiment New York Vol. Infantry. Admitted December 21st, 1864.

HISTORY.—(ANTE MORTEM.)

John Jordan, native of Nova Scotia. Extremely weak and emaciated when admitted; unable to move himself in bed; states that he has been suffering with Diarrhœa for two months; tongue dry and thickly coated; bowels moved nearly every hour. On percussion there was slight dullness over the chest-posteriorly; skin dry, and presented a yellow color; liver enlarged. Mass. Hyd. given in small doses, with the various vegetable astringents from time to time, with the view of checking the bowels, but with little effect.

January 17th.—Symptoms of Pneumonia observed on the right side of the chest anteriorly; treated by counter irritation and stimulants.

Died from prostration Jany. 21st, 1865.

Case reported by

J. G. KELLER,

A. A. Surgeon, U. S. A.

POST MORTEM,

Twenty hours after death. Extreme emaciation.

BRAIN.—Light colored, normal. Measured 7 inches; 38½

ounces in weight.

LUNGS.—Somewhat small, containing nodules with pus in centre, the largest involving not more than three (3) pulmonary lobules, the smallest, part of one. In the left lung these were remarked unaccompanied by other grave changes of the pulmonary tissue, but in right side accompanied by sporadic tubercles, of which a number were observed of miliary type, and by a serous congestion so intense as to make the pulmonary tissue engaged of the sp. gr. of water. Melanic matter in more than usual quantity was observed on surface, and to pervade parenchyma of both lungs.

LIVER.—In removing thoracic viscera such tension was made upon diaphragm as to break up certain adhesions formed between the postr. supr. surface of right lobe of liver corresponding with phrenic surface and make an orifice, out of which pus issued abundantly, of a gray color, odorless, very fluid, which, however, became of such a consistence presently as to escape by original orifice only on pressure. When liver was removed it was found that the left lobe and an homogeneous portion of right was of a pale ash red. Gall bladder quite full; was of a bright yellow color. Inferior portion of right lobe was also ash red in color, except anteriorly, where a bluish black, fibrinously veined, superficial substance was observed. The abscess contained, by rough estimate, a quart of pus; had well marked fibrin. walls of firm consistence, and its contents varied from the walls in fluidity; its contents, moreover, were viscid and flaky near the walls; an eighth ($\frac{1}{8}$) of an inch beyond the outer line of abscess wall the substance of the liver was dark red, and appeared to present signs of greatly increased organic action, and scarcely to retain any functional properties. It was thought that the binding together of the diaphragm and liver, in part through the peritoneal fold, indicated a disposition of nature to discharge the pus through the lung.

SPLEEN.—Very firm consistence; marked trabeculae; some capsular thickening, (general,) and generally of a dark watery red color. Length, 6 inches; weight, $9\frac{1}{2}$ ounces.

KIDNEYS.—Somewhat light colored. Length, $5\frac{1}{4}$ inches; weight, 6 ounces.

INTESTINES.—Solitary ulcers in large intestine. In the descending and transverse colon these were circular, a line or two

in diameter, having bottoms of most discolored and dark, of some not discolored, presenting increased number and size in transverse colon; a spot of congestion and superficial ulceration met with in latter; dark bottomed and solitary ulcers, amid slight congestion in lower part ileum; arborescent and finely granulated mucous membrane was generally presented in ileum. Peyer's patches were not diseased; one long spot of arborescent congestion finer than that preceding was observed in upper part of ileum. Lower part of jejunum gas of some kind observed under mucous membrane causing appearances like flocculi of soap-suds; two spots of these flocculi in Peyer's patches, above these flocculi no disease found.

HEART.—Pale and flabby.

HOSPITAL NUMBER, }
58. }

[CASE No. 8.]

Thomas O. Herring, age 44, Private, Co. E. 91st New York Volunteers. Admitted January 30th, 1865. Died February 2d, 1865.

HISTORY.—(ANTE MORTEM.)

Patient was brought into the Hospital in the evening, after a debauch, suffering from nausea, with some febrile action, for which two doses of Prot. Chlo. Hyd. were prescribed. On the following morning nausea continued with occasional vomiting; medicine acted freely. Slightly restless during the day. Pulse 100,—evening round. Administered 10 gr. Dov. Powder to allay nervous irritability. Following day slightly delirious, administered Valerian and Laudanum. Diet light but nutritious. Patient complained of no pain from the time of his admission to time of death. On the day preceding death ate his meals heartily. About 10 o'clock, P. M., was found moribund and died following morning at 7 o'clock.

Case reported by

W. G. SMULL,

A. A. Surgeon, U. S. A,

POST MORTEM,

Eight hours after death.

Suggillation in dependent parts; muscular system well developed; rigor mortis.

STOMACH.—Natural size, some thinning of mucous membrane, with spots somewhat arborescent, following lines of mucous folds; chiefly found in fundus; dark red, in part apparently blood extravasations.

RIGHT LUNG.—Healthy, a little leathery posteriorly, lower lobe, and remarkable in not having a middle lobe. Melanic matter following course of ribs.

LEFT LUNG.—Recent adhesions closed the posterior and inferior portions of the left pleural sac and agglutinated the opposed surfaces of the upper and lower lobes of the lung. The inferior lobe was found in second stage of pneumonia, portions sinking readily in water, and yielding when broken and pressed, a puruloid fluid. On a clean section close observation revealed a fine granular appearance.

KIDNEYS.—Of somewhat light color, pyramidal bodies redder than natural, and readily torn in direction of tubular length.

Right Kidney, length 5 inches. Weight $5\frac{1}{2}$ ounces.

Left kidney, length $4\frac{3}{4}$ inches. Weight $6\frac{1}{2}$ ounces.

LIVER.—Organ enlarged, solid, friable, full of blood; pungent hepatic smell. Gall bladder filled with black bile.

Liver, length 10 inches. Weight 4 pounds and 7 ounces.

SPLEEN.—Flexible, nearly black internally, easily broken, yielding upon pressure little or no fluid.

Spleen, length 7 inches. Weight 1 pound and 3 ounces.

PANCREAS.—Normal excepting size.

Pancreas, length 9 inches. Weight $3\frac{1}{2}$ ounces.

HEART.—Atheromatous spots observed in aorta separated and small; borders of valves were hard, especially of the right and left. A white fibrinous clot strongly marked by ears arose from the anterior cusp, lower border connecting with a free band from the auricle. Clots extended in pulmonary veins partly white and black. A well developed clot arising in the right auricular appendix extending into right ventricle filled its apex, and constituted a species of false septum by which

blood was cast upon mouth of artery. Extending at an angle of forty-five degrees with the long diameter of the body of the clot, a thick clot slightly ear-marked extended into pulmonary artery bifurcating with the same. It was thought that the left ventricle was slightly hypertrophied.

INTESTINES.—Mucous membrane of the ileum slightly thinned.

Peyers patches healthy.

BRAIN.—Pacchionian bodies well developed; union of meninges, so that when the calvarium was removed blood flowed from a torn orifice; surface of substance of brain was of a somewhat red color.

Brain, length antr. postr. diam., $7\frac{1}{4}$ inches. Weight, 47 ounces.

HOSPITAL NUMBER, }
2,476.

[CASE No. 9.]

John Garden, age 28, Priv. Co. D, 15th New York Volunteers; admitted Oct. 26th, 1864, from the field. Died February 4th, 1865.

HISTORY.—(ANTE MORTEM.)

Admitted with amputation of mid. 3d of left thigh; operation performed on the field Oct. 19th, 1864. At the time of his admission the femur was protruding an inch beyond the place of amputation. The patient was very anæmic and subject to chronic diarrhœa, more or less profuse, which with the profuse suppuration rendered an operation for the time inadvisable.

On Dec. 30th, the operation of resection was performed by Surg. Z. E. Bliss, U. S. V., with the removal of the femur up nearly to trochæter major. The subsequent result was a slow improvement of the wound for some weeks, when colliquative diarrhœa set in, and the patient sank rapidly until death.

Case reported by

W. G. SMULL,

A. A. Surg., U. S. A.

POST MORTEM,

Twenty-two hours after death.

*Specimen of
Gardner's
in file in the
Department
of Medicine*

Extreme emaciation; slight rigor mortis; no marked suffillation.

BRAIN.—Very flexible, normal; about one drachm of limpid serum in each of the lateral ventricles; pia mater readily detached. Paechionian bodies, numerous and well developed.

Brain, weight 45 ounces.

LUNGS.—Crepitant throughout, presenting no nodules of congestion; marked well with melanic matter along courses of ribs.

Right lung weighed $12\frac{1}{2}$ ounces. Left lung weighed $8\frac{3}{4}$ ounces.

LIVER.—Very flexible, tracts of vessels marked with white lines; of a firm feel; with appreciable lined, or semi-lobulated feel upon firm pressure. The bile secreted was of an amber color and very fluid. Gall Bladder was very full. The color of liver was somewhat dark and faintly mottled. Substance quite tough in breaking by the finger.

Weight of liver, 2 pounds 13 ounces. Length of liver 9 inches.

Supra-renal capsules remarkably firm, and upon section present a sac filled with white matter; a red line varying in intensity of color from within outwards, the outer third and outermost line of a pinkish color; fine lobules observed upon surface.

LEFT KIDNEY.—Tubular portion of pyramids contrasting strongly with cortical portion in color; both well filled with blood.

RIGHT KIDNEY.—Similar; a little fuller of blood.

Right kidney was 5 inches long and weighed $6\frac{1}{2}$ ounces.

Left kidney was $4\frac{3}{4}$ inches long and weighed $4\frac{1}{2}$ ounces.

HEART.—Small but normal. Weighed $6\frac{1}{2}$ ounces.

INTESTINES.—In the colon grayish flakes adhered closely to the surface throughout the sigmoid flexure; descending colon presented fine red congestion. Light flakes of white material met with in company with deeper congestion in ascending colon. In ileum (lower part) the same flaky spots, very small, however, were observed; apparently some wasting of substance of ileum; fine granulations apparent by reflected light; about half-way up the ileum a black spot was met with in which the gut was readily torn.

JEJUNUM healthy.

Weight of intestines, $3\frac{1}{2}$ pounds.

STOMACH.—Somewhat contracted, and reddened at fundus.

Pancreas, weight $1\frac{1}{2}$ ounces.

Spleen weighed $8\frac{1}{2}$ ounces and was 6 inches long.

VESSELS.—A clot was found $2\frac{1}{2}$ inches long in the extremity of femoral artery; vessels apparently in natural state. Conical clot, extending to first small branch, with base uppermost, clot was of a light brownish or pink color. Femoral vein below the profunda became much narrower with thick walls—terminating in thick cord. Internal saphenous vein pointed and corded at extremity; not opened.

Anterior crural nerve convoluted, terminating in a large mass of fibrin tissue, almond shape, connected with large fibrin masses in stumps proper. Sciatic nerve slightly clubbed at extremity.

The bone terminated in a rounded bare face (in opposition) ensocketed with fragments of new bone, apparently products of periosteum shreds.

NOTE.—The disease apparent in the liver is thought to be species of cirrhosis, and the death of the patient theoretically attributed to liver defect. That is to say, tissue required materials of plasm that could not be furnished on account of the disorganization of the catalytic plasm former—the liver. An effort at life was manifested in the condition of the osseous tissue of the stump.

[CASE No. 10.] }

HOSPITAL NUMBER, }
93.

Austin Vacon, Priv. Co. G, 186th New York Volunteers, admitted for burial February 5th, 1865.

POST MORTEM,

Thirty-six hours after death.

BRAIN.—There was a slight opacity of the visceral arachnoid near vertex.

Near origin of auditory nerves upon floor of fourth (4th) ventricle a central line of congestion was observed with lateral spots, clearly marked.

Brain weighed $53\frac{1}{2}$ ounces.

LUNGS.—Left apparently healthy with the exception of a

lobulated portion consisting of congestions ; portions cut from which were nearly of the specific gravity of water.

On the right side flakes of lymph were observed, some quite extensive, which bound together the opposed surfaces of lobes.

The parietal pleura was thickly covered with a sheet of lymph, so was also the diaphragmatic pleura, but there was little or no effusion of fluid into the sac.

Right lung, lowest lobe, near the centre a mass of black congested lung substance was found, portions of which sank in water, while the greater part was nearly of the same sp. gravity.

Left lung weighed 1 lb. $\frac{1}{2}$ oz. ; measured $8\frac{1}{2}$ inches. Right weighed 1 lb. 13 oz. ; measured $8\frac{1}{2}$ inches.

LIVER.—Presented a light color, was somewhat full of blood and exhibited black congestion on anterior inferior surface.

GALL bladder, light colored, had contents of light color.

The capsule of the liver was easily torn off—outlines of the acini well marked.

Liver weighed 3 lb. $\frac{1}{2}$ oz. ; measured $6\frac{1}{2}$ inches.

KIDNEYS.—Right well marked, left same. Outlines of tubular portions well marked. Right weighed 5 oz. ; measured $4\frac{1}{2}$ inches. Left weighed 5 oz., measured $4\frac{1}{2}$ inches.

SPLEEN.—Natural size, flexible, black congested internally.

Spleen weighed 5 1-2 oz.; measured 5 1-4 inches.

Heart.—Auriculo-ventricular clot on right side strongly attached to cusps of tricuspid valve and an arm was ear-marked opposite artery valves. Heart weighed 9 oz.; measured 4 inches.

INTESTINES.—Large intestines slightly congested in portions ; small ulcers in ileum ; thinning of mucous membrane in upper part of ileum. No other lesion observed.

STOMACH.—Darkly congested.

Pancreas weighed 3 1-2 oz., measured 6 inches. Normal.



[CASE No. 11.]

HOSPITAL NUMBER, }
94. }

Admitted for burial, (name unknown,) Feb. 4, 1865.

POST MORTEM,

Thirty-six hours after death.

Body of very good form and well proportioned. On opening the thorax a great deal of serum was observed in the serous sacs. The mesenteric glands were enlarged. The supra renal capsules were well developed and markedly sacculated.

BRAIN.—Slightly marked with the paccionian bodies; the surface of the ash-colored brain matter much lighter than usual; of natural consistence. The lining membrane of the 4th ventricle near nib of calamus scriptorius was somewhat rough to the feel and slightly discolored, (red.)

LUNGS.—Healthy. Watery infiltration and partial discoloration in the posterior surface of right lung; similar condition in the left lung, only one a little more advanced. Left lung weighed 1 lb. 12 oz.; measured 8 inches. Right lung weighed 1 lb. 8 oz.; measured $8\frac{3}{4}$ inches.

LIVER.—Enlarged; friable; of violet color; black congestion on inferior surface. Liver weighed 4 lb. 13 oz.; measured 10 inches.

KIDNEYS.—Similar in color to liver, with black congestion in the dependent portions. Upon pressure a serous fluid was effused from portions of the kidneys. Right kidney weighed $8\frac{1}{2}$ oz.; measured 5 inches. Left kidney weighed $9\frac{1}{2}$ oz.; measured 5 inches.

HEART.—Somewhat loaded with fat externally, and containing small white clots, one extending free from right auricular appendix, the other extending free from the apex of right ventricle, another extending free from the anterior cusp of the bicuspid valve. Heart weighed $11\frac{1}{2}$ oz.

Spleen weighed 3 1-2 oz.; measured 5 1-2 inches.

INTESTINES.—Great thinning and softening of mucous membrane of jejunum and ileum, detachment upon touch. Mucous membrane blackened (cadaveric?) from stomach to caecum. Peyer's patches also dark, with black points and small oval ulcers; a lower Peyer's patch clearly ulcerated, and from this down these patches were ulcerated. Near caecum oval ulcers appeared again, deep in midst of blackness and softening. Except softening of mucous membrane, blackish and probably cadaveric, no other lesions observed in large intestines.

[CASE No. 12.]

HOSPITAL NUMBER, }

Chancey James, Co. D, 6th New York Heavy Artillery, admitted for burial.

POST MORTEM,

Thirty-six hours after death.

BRAIN.—Pacchionian bodies quite large. Pia mater detached with difficulty. Substance firm, color natural. Arachnoid natural. When meninges were opened about a half ounce of serum flowed. The living membranes of lateral ventricles had a leathery feel.

Brain weighed 47 oz., measured 7 1-2 inches.

LUNGS.—Normal. Some infiltration in posterior portion of left, supposed to be cadaveric.

Right lung weighed 18 1-2 oz., measured 9 inches. Left weighed 15 1-2 oz., measured 8 inches.

HEART.—Left ventricle somewhat enlarged; no heart clots found. Weighed 6 1-2 oz., measured 3 inches.

LIVER.—Somewhat large; universally black; friable—strong liver smell.

GALL.—Bladder of light color, filled with amber colored bile.

Liver weighed 2 lb. 13 oz., measured 9 1-2 inches.

SPLEEN.—Large (thick) and of similar color to liver; flexible, soft, uniformly colored. Weighed 15 1-2 oz., measured 6 1-2 inches.

KIDNEYS.—Right of a brick red hue internally; little difference in color between cortical and tubular portions. Marked black congestion inferiorly about a line in thickness.

Left kidney similar to right.

PANCREAS.—Normal. Weighed 2 1-2 oz., measured 7 $\frac{3}{4}$ inches.

INTESTINES.—Mucous folds in large intestines somewhat reddened; no ulcers observed nor wasting of mucous membrane. Congestion in the lower part of the ileum above which the gut becomes yellow; mucous membrane thinned near the upper portion of the ileum, congestion again met with in the form of a small collection of blood spots, apparently effusions, underneath

the mucous membrane. Above the first region of congestion similar spots were observed along the lines of mucous folds and clustered around small patches of Peyer, above these again a darkly congested region was observed with similar blood effusions along the mucous folds, and still higher tendency again observed to effusions of blood along mucous folds.

In Jejunum (lower part of,) similar congestion met with; effusion more general. Ascending still, these congestions were met with as far up as the middle of jejunum—to be met with again, strikingly marked, with dark red spots of blood effusion in the valvulae conniventes—disappearing again—again to appear with less intensity, but more extensively; toward upper part of jejunum met with again in form of a general congestion.

Duodenal glands plainly felt.

Stomach of a light pink color near pyloric extremity with grayish mucous membrane not easily detached. In fundus and anterior portion of stomach pink color not so well marked, but very well marked in posterior superior portion. Organ somewhat enlarged.

[CASE NO 13.]

HOSPITAL NUMBER, }
74. }

James Simonds, age 39, Priv. Co. A, 3d New Hampshire Vols; admitted February 2d, 1865, and died February 7th, 1865.

HISTORY.—(ANTE MORTEM.)

Patient was admitted with marked evidence of the first stage of pneumonia in left lung, extending nearly over its entire surface. The respiratory murmur was finely crepitant.

Crepitation became more crude on the evening of February 6th. Symptoms of Laryngeal inflammation set in succeeded by those of oedema of glottis, which continued until Laryngotomy was deemed essential which was accordingly performed by the Surgeon in Charge. The patient died about twelve hours afterward.

Case reported by

W. G. SMULL,
A. A. Surg., U. S. A.,

[NOTE BY GEORGE M. MCGILL.]

When the operation was performed the patient was apparently dying. The respiration was excessively labored and ineffective. A blue color pervaded the surface---the pupils were sublated and the extremities cold.

The operation was extremely simple---performed by a straight incision. After entrance between the thyroid and cricoid cartilages was effected, it was maintained by a gutta percha tube---finally, to make the breathing very easy, by two gutta percha tubes.

As soon as the operation was performed all breathing by the glottis ceased, except a little valvular sough. Warmth returned to the extremities and a faint color appeared in the face. But the pneumonic prostration was too great to permit life.

—o—

POST MORTEM.

Ten hours after death.

BRAIN.—Normal. Weighed 49 oz., measured 7 inches.

HEART.—Loaded with fat externally, the mass of this lying opposite the anterior border of the right ventricle and posterior border of the same and along the auriculo-ventricular lines. Heart clot arising in the right auricular appendix extending through tricuspid valve communicated with septum clot, binding anterior cusp to apex of ventricle.

From its origin in tricuspid valve and anterior portion of right ventricle an arm extended into pulmonary artery ear-marked opposite pulmonary valves.

Left ventricle clot extended from anterior cusp into aorta ear-marked opposite valves—same communicated with an auricular clot from pulmonary veins. Heart weighed 7 1-2 ounces. Measured 4 $\frac{1}{4}$ inches.

LUNGS.—Upper part of right lung (otherwise healthy) contained numerous hard black granules, section of which presented a white centre; one or two masses were large as peas, even these were surrounded by unirritated pulmonary tissue. The left lung, both upper and lower lobes except the very anterior portion of lower lobe, was solidified in second stage of pneumonia. Substance was friable, easily separated from pleura, presenting on a cut or torn surface a fine granular appearance, yielding upon expression a grayish fluid and readily sinking when thrown into water.

The left pleural sac was inflamed throughout, thick masses of lymph observed anteriorly and inferiorly. Right lung weighed

1 lb 5 oz., measured $8\frac{3}{4}$ inches. Left lung weighed 3 lb 10 oz., measured 9 1-2 inches.

SPLEEN.—Had the color of liver, perhaps a little lighter, very flexible and easily broken down. Weighed 10 oz., measured 5 1-2 inches.

PANCREAS.—Normal. Weighed 3 oz., measured 8 inches.

KIDNEYS.—Right weighed 6 oz., measured 5 inches. Left weighed 7 1-2 oz., measured 5 1-2 inches.

Supra-renal capsules enlarged, hardened and their sac filled with a bloody fluid. The capsule of the right kidney was torn off with difficulty, substance underneath it granulated in appearance, of light gray color mixed with red externally. Tubular portion of a dull red color. Left kidney similar in all respects to the right—perhaps a little fuller of blood.

LIVER.—Enlarged, of a rather light brown color, capsule easily detached, granulated appearance very plain.

Substance containing little blood and very friable. Weighed $4\frac{3}{4}$ lbs., measured 10 inches.

INTESTINES.—Black spots observed in rectum. Colon somewhat congested in ascending part and in caecum; upper part of jejunum of a very light color; some congestion of mucous membrane of fundus of stomach.

Great œdema of glottis observed—meaning by this a light colored swelling which so distended the borders of the opening into the air passages as to close them in natural situation almost perfectly.

No disease except a universal reddening was observed in the larynx and trachea below the vocal membranes. Just about the entrance of the tubes a bloody plug of mucous was observed, which could have however exerted no influence in causing death.

Bronchial glands enlarged and blackened. The blackening not universal. Tissue of these glands friable and readily breaking with a pulpy mass of a grayish or blackish color.

[CASE No. 14.]

HOSPITAL NUMBER, }
96.

George P. Thomas, age 26, Priv. Co. G, 43d Ohio Vols., was admitted to this Hospital on the ground of humanity, February 4th, 1865, and died February 12th, 1865.

HISTORY.—(ANTE MORTEM.)

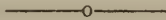
Patient came in with the measles; eruption well defined. Was treated with febrifuge medicines and in a few days the eruption had almost entirely disappeared.

Symptoms of Typhoid fever manifested themselves two days before his death from which the patient gradually sank.

Case reported by

W. G. SMULL,

A. A. Surgeon, U. S. A.



POST MORTEM.

BRAIN.—Normal. Pacchionian bodies somewhat adherent. Weighed 56 oz., measured $7\frac{1}{2}$ inches.

LUNGS.—Congested posteriorly. Nodulated inflammations were observed, sections from substance implicated in which, sank in water. Miliary tubercles in great numbers filled the posterior portion of the lungs and were more numerous in the lower portions of the same. Right lung weighed 37 oz., measured 10 inches. Left weighed 35 oz., measured 15 inches.

HEART.—Auriculo-ventricular clot in right side, arising in the auricular appendix, extended into ventricle. In left ventricle clot arising by delicate attachment from anterior cusp, extended into aorta. Heart weighed 13 oz.; measured 5 inches.

LIVER.—Weighed 66 oz., measured 14 1-2 inches.

SPLEEN.—Rather small and blackened internally. Miliary tubercles found in this organ also. Weighed 6 oz., measured $4\frac{1}{2}$ inches.

PANCREAS.—Normal. Weighed $3\frac{1}{2}$ oz., measured 7 inches.

KIDNEYS.—Somewhat enlarged; much lobulated, especially the left, so that the capsule was so attached in the lobular interstices as to be with difficulty torn off. Each kidney weighed 8 oz.; measured 5 inches.

INTESTINES.—Congestion of rectum; reddening of transverse and descending colon. No ulcers observed; darkening and tumescence of first Peyer's patch met with in ascending the small intestines. In the ileum small raised points were observed hard to the feel; Peyer's patches generally tumid and

dark; deeply congested mucous folds observed half way up the ileum. Above these a long Peyer's patch enlarged and reddened was situated in the midst of another congested region, above this again congestion was deep and extensive. When well among the valvulae conniventes amidst another congested region a structure resembling a patch of Peyer, enlarged as similar patches of the ileum were, a foot in length, was observed.

STOMACH.—Small (contracted.) Mucous membrane thrown into great folds and somewhat congested. Intestines weighed 4 lb. 14½ oz.

[CASE No. 15.]

HOSPITAL NUMBER, }
154. }

Joseph Bryner, age 19, Priv. Co; E, 88th Penna. Vols.; admitted from City Point, February 11th, 1865.

HISTORY.—(ANTE MORTEM.)

Patient came in delirious; pulse 120; could give no connected account of his history; stated that the ball was extracted at the place of entrance. Abdomen tumid and excessively tender could not bear pressure. States that his appetite was good and that his functions were regular. His delirium in 24 hours assumed a low muttering form from which he did not rally. Died, February 13th, 1865.

Case reported by

W. G. SMULL,

A. A. Surg., U. S. A.

POST MORTEM,

Twelve hours after death.

On making the incision opening thorax and abdomen, bladder was punctured in the pre-peritoneal space and a large quantity of urine flowed out.

Blood fluid. In the auscultatory examination just before death dullness of percussion was observed in the right side

posteriorly with bronchial respiration, but nothing but the subcrepitant rale was heard over the whole surface of the left lung and anterior surface of the right. The orifice of entrance of ball was at the junction of a line drawn from the anterior superior spinous process perpendicular to one drawn horizontally from pubis.

Right hip joint opened; head of bone fractured; ball lodged with stellate fracture in anterior hemisphere of head. Fracture of four rays—two horizontal rays and one perpendicular. The leaden surface of the missile was observed at bottom of bone wound. Joint occupied with a reddish consistent puruloid fluid. Synovial surface generally reddened or blackened with a dull or granulated surface; offensive smell about the ligamentum teres, the attachment of which to caput was blackened. Specimen preserved for transmiss. to the Surg. Gen.

LUNGS.—Right lung posterior portion of uppermost lobe was nearly of blood color; of smooth section, though of greater sp. gr. than water; not friable but leathery in consistence, very flexible and elastic; upon section it was observed that bronchial tubes of minute calibre had a pointed feel, while the adjacent bloodvessels were large and patulous: this morbid structure was merged, islanded as it were, in comparatively healthy pulmonary tissue.

NOTE.—A similar description to that given would apply to what has frequently been observed to exist, in isolated lobules or lines of lobules in posterior surfaces of lungs of patients dying of no pulmonary disease; and the condition is theoretically ascribed to an organic engorgement or tissue-proper inflammation distinct from the air cell fibrinous inflammation and exudation held to exist in what is ordinarily called pneumonia.

Lobules in color, consistence, and general qualities resembling the mass described in posterior portion of uppermost lobe were observed in posterior portion of lowest lobe of right lung. In a collection of such at upper back portion of this lobe the outlines of the pulmonary lobules were very clearly defined.

Posterior portion of lower lobe of left lung a stratum of pulmonary substance of this character, (that observed in right lung.) which may well be called carnification, two layers of lobules deep, was observed. Right lung weighed $28\frac{1}{2}$ oz.; measured 11 inches. Left lung weighed $15\frac{1}{2}$ oz.; measured $8\frac{1}{2}$ inches.

KIDNEYS.—Normal,

LIVER.—Light color; friable; capsule of it readily torn off; acini conspicuous on a torn surface; organ somewhat mottled superficially. Weighed 5 lbs. 11 oz.; measured 12 inches.

HEART.—Open septum between auricles, (specimen preserved;) large yellow fibrinous clot in right auricle communicating with a clot in right ventricle. The latter clot enveloping the tendinous cords and the right anterior cusp extended in a sheet to the apex and was there attached to the musculi pectinati. The same pyramidal clot gave rise by the left angle of its base to a pyramidal clot which arched over the smooth surface leading to the pulmonary valves and extended, ribbon-like, into the pulmonary artery with distinct ear marks opposite valves. Substance of right ventricle somewhat thickened and loaded with fat externally about the vessels and in vicinity of the auriculo-ventricular line.

Left auricle, small ribbon-like clot joining a left vent. clot, extending from anterior cusp of mitral valve to apex formed a solid acute angle of pyramidal planes, leaving a sinus opening to the left, from attachment of the right borders.*

A clot arm arose from the anterior cusp of bicuspid valve, and extended into the aorta; ear marked by the valves; substance of left ventricle thickened, as was the substance of the auricles. Heart weighed $15\frac{1}{2}$ oz.

BRAIN.—Serum found in lateral ventricles, half an ounce in each, (estimated;) on floor of fourth ventricle a star-shaped congestion was observed on the right side, about the origin of the auditory nerves. Congested vessels were distributed on floor of fourth ventricle, chiefly on right side; a rough feeling at nib of calamus scriptorius. Brain of firm consistence; pia mater readily detached; visceral arachnoid somewhat opacified in certain localities, and under this opacity the pia mater was detached with more difficulty. Pacchionian bodies very well marked. Below origin of auditory nerves lines of congestion converging to nib were observed. Weighed 3 lbs. 7 oz.; measured $8\frac{1}{4}$ inches.

INTESTINES.—Normal throughout.

* The blood that came from the auricle was reflected in the ventricle from this remarkable angle, being thrown upon the left superior angle of that cavity.

STOMACH.—Internally ingested along the longitudinal mucous folds.

Intestines weighed 4 lbs. 3 oz.

Spleen weighed $13\frac{1}{2}$ oz.; measured 5 inches.

[CASE No. 16.]

HOSPITAL NUMBER, }
175.

John W. Tucker, Priv. Co. A, 4th U. S. C. T. Admitted for burial Feb. 13th 1865.

POST MORTEM,

Number of hours after death unknown.

Such disease of the pleura as united opposed surfaces; lung substance friable posteriorly on the right side, somewhat leathery on the left crepitating in the latter, and filled with miliary tubercles. Lung substance torn in removal of organs from chest. Right Lung weighed 1 lb. 3 oz.; measured 7 inches. Left Lung weighed 1 lb. 2 oz.; measured $7\frac{1}{2}$ inches; sac of pericardium contained 28 fluid ounces of serum. Upon the parietal and visceral surfaces pericardium presented numerous patches granulated; and in the sac, clusters of granules, one-tenth of a line in diameter, of the size of an apple^{seed}, were met with free. No clots in heart. Miliary tubercles in the spleen and liver; weight of spleen $13\frac{1}{2}$ oz.; organ measured 6 inches.

KIDNEYS.—Normal. Right kidney weighed $6\frac{3}{4}$ oz.; measured 5 inches. Left weighed 7 oz.; measured 5 inches. Tubercles observed in the peritoneum. Tuberculous mass found in white substance of anterior lobe of right cerebrum, $\frac{3}{4}$ of an inch in diameter. Specimen preserved: No. 16. Mass of tubercles in bronchial glands. Pancreas weighed 4 oz.

INTESTINES.—No ulcers found in intestines, and no abnormal appearance observed; this whole tract was carefully examined. Mucous membrane slightly thinned. Intestines weighed 7 lbs. 1 oz. Mesenteric glands not greatly enlarged, nor were they observed to be tuberculous. Liver weighed 4 lbs. 11 oz.; measured 10 inches.

Patient emaciated, feet, legs, and face, swollen; large abscess on neck, left side.

[CASE NO 17.]

HOSPITAL NUMBER, }

A Rebel. Name unknown. Age supposed to be about thirty.
Admitted for burial.

POST MORTEM,

Number of hours after death unknown.

Height, 5 feet 11 inches. Body a little emaciated. Blood fluid.

LUNGS.—In lowest lobe, right lung, red hepatization with gray merging into it. Red and gray hepatization in middle lobe such as to present a mottled appearance upon section. Some fibrin formed in pleural sac, recent. About eight (8) ounces of serous fluid found in right pleural sac, Right lung weighed 4 lbs. $8\frac{1}{2}$ oz.; measured $10\frac{1}{2}$ inches. Left weighed 1 lb $12\frac{1}{2}$ oz.; measured $10\frac{1}{2}$ inches.

HEART.—Large, with black and yellow clots following the usual arrangement. Cusps of the tricuspid valve were closely bound together. Heart weighed $14\frac{1}{2}$ oz.; measured 4 inches.

BRAIN.—Serum found in the lateral ventricles. The posterior horns extended unusually far back. Brain weighed 49 oz.; measured $7\frac{1}{2}$ inches.

LIVER.—Of firm consistence presenting black bile in the bladder. Liver weighed 3 lbs. $10\frac{1}{2}$ oz.; measured $9\frac{1}{2}$ inches.

SPLEEN.—Natural size and firm. Weighed 7 1-2 oz.; measured 6 inches.

KIDNEYS.—Markedly lobulated. Right weighed 7 1-2 oz.; measured 5 inches. Left 8 1-2 oz.; measured $5\frac{3}{4}$ inches.

Pancreas weighed 3 oz.; measured 8 inches.

STOMACH.—Large; fundus congested. Duodenum congested; so was also the upper part of jejunum also the lower part of same. Mucous membrane thinned in small intestines. No ulcers observed nor any striking abnormality.

[CASE No. 18.]

HOSPITAL NUMBER, }
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A Rebel. Name and age unknown. Admitted for burial.

POST MORTEM.

No of hours after death unknown.

A part of the upper portion of the right cerebrum was retained as illustrative of a morbid process in the pia mater, by which itself with the arachnoid and dura mater were bound together in a remarkable manner. The whole brain in this case was very full of blood, of a firm consistence and presented such an effusion of serum under the pia mater and in the ventricles as sustained the opinion that immediate cause of death was serous apoplexy.

Cerebellum was not so full of blood as cerebrum; consistence of latter firmer; color natural. The arachnoid membrane seemed to be opacified. Weight of brain 3lbs. measured 7 1-2 inches.

On the anterior portion of the lower lobe of the left lung, a large number of isolated lobules were found in a consolidated or pneumonified condition, so as to sink when separated and cast into water, and to break up under the finger as ordinary pneumonified pulmonary tissues. Right lung weighed 2 lbs. 5¼ oz.; measured 10 inches. Left weighed 1 lb. 13 oz.; measured 9½ inches.

LIVER.—Large and pale, weighed 4 lbs. 7 oz.; measured 11 inches.

HEART.—Black clots with ear marks found. Weighed 8 1-2 oz.; measured 4 inches.

SPLEEN.—Normal. Weighed 7 oz.; measured 9 inches.

KIDNEYS.—Normal. Right weighed 6 1-2 oz.; measured 5 inches. Left weighed 6 1-2 oz.; measured 6 1-2 inches.

[CASE NO. 19.]

HOSPITAL NUMBER, }
208. }

Orlando Jones, Priy. Co, C, 81st Penna. Vols; Died Feb. 17th 1865,

HISTORY.—(ANTE MORTEM.)

The patient was admitted Feb. 16th, in a state of partial coma; extreme palor with gurgling respiration, pupils much dilated. He could give no rational account of his previous history. Counter-irritation was applied to the back of the neck and revulsives by the usual means. In about six hours he was able to speak and stated that he had been sick only a few days. There was slight tenderness in pressure in right iliac fossa, attended with retention of urine, about 24 oz. of urine drawn off by catheterization. Evacuation by the bowels free. On the following morning the patient was more conscious; respiration similar to that mentioned above, with involuntary expectoration of frothy mucus. There was slight dullness inferiorly and posteriorly of both lungs, also loud ronchus in both lungs anteriorly and posteriorly. Pupils still dilated. Palor increased. Tongue somewhat dry so far as examination could be conducted.

The liver was found of normal size. Pulse being feeble and the patients vital powers becoming exhausted, and his condition being almost moribund no farther examination was at that time instituted. Catheterization was again performed on the morning of the patients death, and some 20 oz. of urine were drawn off.

Case reported by

W. G. SMULL,
A. A. Surg., U. S. A.

—o—

POST MORTEM,

Three hours after death.

Body in good condition. Form good and muscular system well developed. Blood fluid throughout.

BRAIN.—Of firm consistence, somewhat full of blood, partial reddening of the floor of the fourth ventricle was observed.

Weight of Brain 46 oz.; measurement 7 inches.

LUNGS.—Slight hypostatic congestion in the posterior portion lower lobe, left lung; when this lobe was cut into, spots of intense congestion were observed along the tracts of the bronchial tubes of about $\frac{1}{8}$ calibre. Melanic matter existed in such abun-

dance upon the surface of the lung as to give to the whole organ superficially a black appearance. Weight of right lung 1 lb. measurement $9\frac{1}{2}$ inches. Left 1 lb. 5 oz.; measurement $9\frac{1}{2}$ inches: small clots observed in the heart, these evidently, mainly post mortem. Weight of heart $9\frac{1}{2}$ oz.; measurement 5 inches.

BRAIN.—The Pacchionean bodies, resembling in appearances and physical characteristics recently thrown out fibrin, in great number, were found on the summits of the cerebra.

Serum was observed in small quantities in the ventricles. The veins of the pia mater were quite full. Weight of brain 46 oz.; measurement 7 inches.

LIVER.—Of dark color, having very black bile in the gall bladder, more solid than natural, marked with fibrinous lines along the tracts of the vessels. Weight 3 lbs 13 oz.; measured $11\frac{1}{2}$ inches.

INTESTINES.—Canal somewhat reddened in jejunum and ileum.

SPLEEN.—Apparently normal. Weight 7 oz.; measured $6\frac{1}{4}$ inches.

KIDNEYS.—Somewhat full of blood; urine healthy. Supra renal capsules somewhat enlarged and quite firm. Weight 1 oz.; measured $2\frac{1}{4}$ inches.

PANCREAS.—Normal. Weight 4 oz.; measured $8\frac{1}{2}$ inches.

[CASE No. 20.]

HOSPITAL NUMBER, }
133. }

John H. Thomas, age 22 years. Private, Co. I. 32nd Mass. Was admitted Feb. 11th, was wounded at Hatcher's Run by a minie ball, which entered the left shoulder to the left of and somewhat above coracoid process, passed obliquely through and was extracted according to his own statement one inch to the left of the spinal column, near the 8th dorsal spinous process. Died Feb. 17th, at 8 o'clock P. M.

HISTORY.—(ANTE MORTEM.)

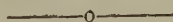
Patient was admitted much enfeebled and unable to sit in an upright position or to lie down. A large amount of grumous offensive matter discharged in great profusion from the posterior opening. Respiration was partly performed through the same

orifice. Patient continually suffered from irritative fever with deficient appetite, all efforts to arouse his vital powers failed until he died.

Case reported by

W. G. SMULL,

A. A. Surgeon, U. S. A.



POST MORTEM.

Held at 4 P. M. February 18th 1865,

Body of good form, no rigidity of muscles notable.

INTESTINES.—In the rectum a large number of areolated black points were observed; the same were observed throughout the larger intestine: The large intestine was hyperæmic arborescently, in spots, in which as a rule it was somewhat thinned. Mucous membrane of ileum somewhat thinned and congested; black points still observed and seen in Peyer's patches. Mucous membrane readily washed away in the upper part of the ileum. The jejunum somewhat blackened in the middle portion; in the upper part the congestion became intense, then a lighter color was presented and then again a dark color. The upper part of the jejunum was of a light color. Weight 3 lbs. 12 oz.

STOMACH.—Mottled about the fundus, regionally hyperæmic and small. Supra renal capsules firm and well developed.

BRAIN.—Normal in every respect. Weight 47 oz. Medulla oblongata was well developed and of firm consistence; at the nib of calamus, there was a granulated appearance and feel, Measurement $7\frac{3}{4}$ inches.

LUNGS.—The ball entered to the left and somewhat above the coracoid process passed downwards, inwards, and backwards, breaking the third rib near the middle and in exit fracturing the 7th rib near the angle; penetrating in its course, the left lung from before, backwards, and without inwards, entering the superior lobe and leaving the inferior lobe. Right lung weighed 1 lb. 7 oz.; measured $8\frac{1}{2}$ inches. Left weighed 1 lb. 4 oz.; measured $6\frac{1}{2}$ inches.

The lung was cuirassed; compressed upon its root and upon the superior anterior surface; adhesions, which had formed between the visceral and parietal pleural in the form of a ring

about the related entrance and exit of the missile, anteriorly, to and from the sac of the pleura, and which had been interfered with by effusion and action in the pleural sac associated with compression of the lung upon its root, were partly ruptured. This rupture involved $\frac{1}{3}$ inferior posterior portion of the defining ring of adhesions.*—The same collapse of the lung separated the whole of the posterior ring of adhesions, the remains of which were traceable; so that discharges from the wounded lung were poured into the pleural sac freely, discharges at least, as great in quantity as those coming from an external wound; one for instance of a fleshy part of the thigh. Lung does not sink in water though nearly of the same specific gravity when immersed as a whole.

The opposed surfaces between the lobes about course of the missile, were thoroughly united. A large quantity of black fluid, about 20 fl. ounces, of strong odor of sulphuretted Hydrogen, and gas were found upon opening sac of pleura. Portions of sac of left side not secluded by defining lines were thickly covered with granulated fibrin of a blackish gray color; and the membrane of sac was thick. It was about half a line in diameter.

The whole left lung had a black appearance mottled with closely adherent layers of fibrinous matter. Right lung and pleural sac occluded by very numerous fibrinous bands, especially posteriorly, so that in removing the organ the lower portion of the lowest lobe was torn. The substance of the lung of the torn lobe was tough, though broken on firm pressure; crepitant, full of blood, and of a dark color. Detached portions floated in water, but were so nearly of the same specific gravity, as to remain sometime under it when plunged in.

Anterior portion of the middle lobe was in the same condition, while the uppermost lobe was nearly healthy, although modally affected as the lowest, that is, was what we have termed "Cuirassed." Specimen of wounded lung preserved.

HEART.—Fibrinous elots ear-marked opposite the pulmonary valves; thicker and whiter on the right side; connected with auricular appendices,

*—The ring itself as observed in its remains was appreciably raised from the pleural surface; sharply defined upon its outer aspect, and of a dark red color,

White clots attached to the tendinous cords and cusps of valves and originating much in the manner described in other cases were found to exist. There was, however, no communicating band running from the anterior cusp of mitral valve to apex of the ventricle; but this band is very frequently absent. Heart weighed 12 oz.; measured 5 inches.

KIDNEYS.—Normal. Right, 6 oz.; measured $4\frac{1}{2}$ inches. Left weighed 7 oz.; measured 4 1-2 inches.

PANCREAS.—Hard, tough, and decidedly enlarged; weighed 3 1-2 oz.; measured 8 inches.

SPLEEN.—Flexible; discolored inferiorly; easily crushed, having its substance of a brick red color; weighed 6 oz.; measured 6 inches.

LIVER.—Large; somewhat mottled; friable; somewhat blackened on inferior surface, having bile of a brown color; weight 6 lb.; measured 10 1-2 inches.

[CASE No. 21.]

HOSPITAL NUMBER, }
168. }

Francis Robinson, a rebel deserter, of Ashville, North Carolina; age unknown; admitted Feb. 11th, 1865, and died Feb. 18th, 1865.

HISTORY.—(ANTE MORTEM.)

Francis Robinson, admitted with every symptom of Typhoid Pneumonia; pulse 120 and thread like; tongue dark and cracked; skin dry, and pungent odor characteristic of typhoid condition.

Auscultation showed the left lung solidified throughout nearly its entire extent; friction sound manifest in like degree. All applications to the chest produced no effect. Patient failed to rally under treatment, which was stimulating, and tonic and died after being unconscious to all impressions for nearly two days.

Case reported by

W. G. SMULL,
A. A. Surg., U. S. A.

POST MORTEM,

Fourteen hours after death.

Body somewhat emaciated; slight rigor mortis; surface marked on side of chest by blister applied before death. About eighteen (18) fluid ounces of amber colored serum, possessing slight odor were found in the left pleural sac.

BRAIN.—Organ very flexible; of an exsanguine color, having fluid in the arachnoid, more than an ounce, and a little in the lateral ventricles. This organ was remarkable further for having an unusually broad and short middle commissure in the third ventricle and a small pineal body. Brain weighed 51 oz., measured $7\frac{1}{2}$ inches.

LUNGS.—A sheet of fibrinous matter overspread the surface of the left lung in great part, and this, when thoracic organs were lifted out, adhered to the parietal pleura. The lower lobe of left lung of natural size, was found solid, mottled red and gray. Upon section, substance of the same lobe presented a finely granulated appearance, the same as has been previously observed in pneumonic cases. This substance was very firm; friable, or granulating under firm pressure, and it did not yield a puruloid fluid, but rather a bloody serum on pressure. It was also elastic, and upon cross section mottled with organically congested regions or blood colored spots varied in character and extent from some red spots observed in cross section of comparatively healthy pulmonary tissue. The latter appeared to follow and be determined by the course of vessels and bronchial tubes, while the former appeared formed by an effusion of blood. The upper lobe was contracted and driven towards summit of the thorax and inwards towards root of the lung by effusion of serum and lymph. Right lung normal. Some seroid fluid in the right pleural sac; little melanic matter found on surfaces of lungs. Right lung weighed 12 oz.; measured 8 inches. Left weighed 15 oz.; measured 8 inches.

HEART.—In the left ventricle a large black clot was found extending into the aorta ear-marked opposite simular valves. The clot was readily broken up and quite elastic.

A mixed clot, black and light colored, was observed in the right ventricle. A light colored clot arose in the right auricular

appendix and connected with this by the inside of right cusp. Also a light colored clot arose in the left auricle and connected with the clot observed in left ventricle. Auricle septum imperforate. Heart weighed 12 oz.; measured $4\frac{1}{2}$ inches

LIVER.—Somewhat mottled superficially, thin capsuled, friable and quite full of blood which flowed readily upon pressure. Bile amber colored and murky. Liver weighed 4 lbs. measured 10 inches.

INTESTINES.—Lines of congestion along the longitudinal mucous folds of the stomach. Two congested and discolored regions in the upper part of jejunum. Solitary glands of the ileum somewhat enlarged and reddened; aside from spots of congestion, enlarged solitary glands and local thinnings of the mucous membrane, the condition of the intestines was regarded as normal.

Intestines weighed 4 lbs. 8 oz.

KIDNEYS.—Normal. Right weighed $5\frac{1}{2}$ oz.; measured $7\frac{1}{4}$ inches. Left weighed 6 oz.; measured $5\frac{1}{4}$ inches.

PANCREAS.—Normal. Weighed 3 oz.; measured $7\frac{1}{4}$ inches.

SPLEEN.—Somewhat discolored on its anterior and inferior border; very flexible; easily broken into a pulp, and breaking with a crepitating sound with the capsule on. Weighed 7 oz.; measured 6 in.

[CASE No. 22.]

HOSPITAL NUMBER, }
157.

William Fader, of Winchester, Canada West. Age 29 years. Priv. Co. A, 140th N. York. Was wounded at Hatcher's Run, Va. Admitted Feb. 11th 1865. Wound was by a minie ball Feb. 6th, 1865.

HISTORY.—(ANTE MORTEM.)

William Fader, admitted with a gun shot wound in the lower portion of the spine, at the junction of the sacrum with the lower lumbar vertebra. Patient was in a condition of excessive nervous irritation, apparently partly from the effects of the wound and partly from the effects of transportation. There was only one opening, the edges of which were flabby with a tendency to slough. His appetite was much impaired and his general condition unfavorable, although he was of rather large

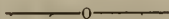
Emp. Surg. Rec.
Feb. 1865
Vol. 4. P. 95
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proportions and of full muscular development. He failed to respond to the action of stimulants and nutritious diet. On the fourth day after admission he had a chill which was followed by decided evidences of Pyæmia from which he gradually sank.

Case reported by

W. G. SMULL,

A. A. Surg., U. S. A.



POST MORTEM,

12 hours after death.

Body of good form. Blood, fluid. Very offensive odor upon opening the body. The ball struck about the fourth division of sacrum, passing forwards and to the right; fracturing the sacrum, lodging in the junction of the ischium and ilium; breaking the bone there and driving fragments inwards; lodging between the bone and pelvic fascia.

BRAIN.—Normal. In apparent structure flexible; slightly softened, showing little blood on section and congested arborescently on floor of 4th ventricle.; weighed 3 lb. $3\frac{1}{2}$ oz.; measured 7 inches.

LUNGS.—Left lung, inferior lobe somewhat congested and both lobes infiltrated with serum. Numerous caseous white substances were met with in the lower lobe, with a few similar in the upper, surrounded on section by an areola of ingested pulmonary substance, and presenting pus in one instance. These were supposed to be masses of fibrinous matter thrown out by the inductive influence of pyæmic disease. Left lung weighed 22 oz.; measured 9 inches.

RIGHT LUNG.—Similarly affected; melanic matter observed in the pulmonary substance. Weighed 1 lb. 8 oz.; measured $8\frac{1}{2}$ inches.

SPLEEN.—Discolored inferiorly and very easily pulped. Weighed 22 oz.; measured 8 inches.

KIDNEYS.—Normal, with rather a pale color. Right weighed 7 oz.; measured $4\frac{1}{2}$ inches. Left weighed 7 oz.; measured 5 inches.

INTESTINES.—Generally discolored, exhaling an offensive odor as from putrefaction. Weighed $5\frac{1}{2}$ lbs.

HEART.—White fibrinous clots existed in this organ, one of which formed a complete septum in right ventricle; clots in

the auricles connected with appendices; perforate auricular septum. Weighed $11\frac{1}{2}$ oz.; measured $3\frac{3}{4}$ inches.

PANCREAS.—Very much enlarged and reddened.

[CASE NO 23.]

HOSPITAL NUMBER, }

A Rebel. Admitted for burial. Supposed to be about 25 years of age.

HISTORY.—(ANTE MORTEM,)

Unknown.

POST MORTEM,

July 22nd, 1864. Body much emaciated, no rigidity.

BRAIN.—No pineal body found in this brain and no commissura mollis. The floor of the 4th ventricle was congested. Substance of the brain firm and not too full of blood. Noticed in the congestion of the fourth ventricle that there were three distended veins, one in the middle line just above origin of auditory nerves; the others, one on either side, that of the right side lesser. A reddish tinge was over the whole floor. Weight of brain 60 oz.; measurement $7\frac{1}{2}$ inches.

LUNGS.—Very close old pleuritic adhesions nearly obliterated the right pleural sac. The lowest lobe of the right lung was carnified, probably in consequence of these. Right weighed 14 oz.; measured $7\frac{1}{2}$ inches. Left weighed 13 oz.; measured 8 inches.

HEART.—The sac of the pericardium was also nearly obliterated. An awkward incision in opening the heart makes the specimen unsightly. Specimen was, however, preserved. Weight 10 oz.; measurement 4 1-2 inches.

LIVER.—Normal; quite full of blood. Weight 2 lbs. 14 oz.; measurement 9 inches.

KIDNEYS.—Congested at the bases of the tubular pyramids. Weight of right 5 oz.; measurement 4 1-2 in. Left 5 oz. measured 5 inches.

PANCREAS.—Normal. Weight 2 oz.; measured 6 1-2 inches.

SPLEEN.—Rather small; of black color and firm consistence. Weight 6 oz.; measured 4 $\frac{1}{2}$ inches

INTESTINES.—Jejunum congested, also congestion throughout the greater portion of ileum. Peyers patches well developed and of dark color; ulcerations found in sigmoid flexure and in the rectum which involved muscular substance.

Supra renal capsules, normal. Weight 1 $\frac{1}{2}$ oz.; measurement 2 $\frac{1}{2}$ inches.

[CASE NO. 24.]

HOSPITAL NUMBER, }

A Rebel. Admitted for burial, February 22nd, 1865.

POST MORTEM.

BRAIN.—Several drachms of liquid found in lateral ventricles. Lining membrane of ventricles somewhat reddened, slightly roughened to the touch especially in the right side. Fourth ventricle presented a discolored floor and contained serum. Weight 52 oz.; measured 7 inches.

LIVER.—Of reddish ash color, of firm consistence exhibiting acini clearly upon surfaces. Bile dark brown. Capsule of liver with difficulty detached. Weight 3 lbs 12 oz.; measured 9 $\frac{1}{2}$ inches.

SPLEEN.—Light color externally. Somewhat enlarged with firm substance. Capsule detached with difficulty. Weight 9 oz.; measured 5 inches.

KIDNEYS.—Of light color externally; one somewhat darker than that of the liver. Right kidney weighed 5 oz.; measured 2 inches. Left weighed 5 1-2 oz.; measured 5 1-2 inches.

LUNGS.—In the lower portion of the left lung, posteriorly, numerous extensive dark red nearly black spots were found presenting all appearances of a pulmonary apoplexy. This left lung had three lobes well marked. No apoplectic spots such as those described, were observed outside of the region specified. Right lung weighed 11 oz.; measured 7 1-2 inches. Left weighed 14 oz.; measured 7 inches.

INTESTINES.—A few surface ulcers observed in the lower part of the large intestines and again in the ascending colon. In the ileum about two feet from the caecum a region was observed in which the intestine was somewhat thickened, and faintly granular to the feel on the mucous surface, color dark red. Lower part inside of the jejunum of dark color.

STOMACH.—Somewhat congested in the fundus.

HEART.—No attached clots observed in this heart, separate thrombs observed. White fibrinous clots in the right ventricle, and black clot in the left. Weighed 8 oz.; measurement 4 inches.

[CASE No. 25.]

HOSPITAL NUMBER, }
151.

Daniel A. McMiller, Priv. Co. K, 4th Penna. Cavalry; age 28 years; was wounded at Hatchers Run, February 6th, 1865; was admitted February 11th, with a gun shot wound. Ball entered the right thorax one inch to the right and below the nipple; passed apparently through the right lung and was extracted according to his own statement at the lower border of the scapula.

HISTORY.—(ANTE MORTEM.)

Air passed freely through the thorax at the point of entrance of the ball. Patient suffered considerably from irritative fever and was seemingly much exhausted. Some discharge of grumous fluid through the posterior opening became daily more profuse, of darker color and more offensive. The anterior opening was closed on the second day of the wound by adhesive plaster in order that respiration of the trachea might be more decided. By this local treatment the patient was enabled to receive into the lungs a large volume of air. Constitutional symptoms became worse gradually and he sank from exhaustion. No symptoms of Pyæmia manifest.—Treatment: Stimulant and tonic with nervous sedatives,

Case reported by

W. G. SMULL,

A. A. Surg., U. S. A.,

POST MORTEM.

Eight hours after death, February 23d, 1865.

The body much emaciated and of offensive odor before opened. Owing to the presence and vehement opposition of the man's brother, only the lungs were examined, and these partially. Ball entered thorax, fracturing the 6th rib, and made exit near the angle of the 8th, in its course lacerating the pleura and bruising and slightly tearing (?) the lung substance.

Lung substance crepitant and readily torn. The pleural sac had its opposed surfaces very firmly connected by recent bands in the separation of which lung tissue was torn. A dark gray offensive puruloid fluid mixed with more fluid liquid of a darker color to the amount of 10 oz. filled the right pleural sac. In the left side the lower lobe was firmly bound by thick tenacious (recently effused) fibrin. In this case the lung tissue was also torn, near the orifices of entrance and exit on the right side pleuritic adhesions were numerous and firm but not such as to shut off communication with the pleural sac.

[CASE No. 26.]

HOSPITAL NUMBER, }
2. 356. }

John E. Stover, Age 45 years, of N. York City. Priv. Co. C. 62d N. York vols. Admitted Oct. 22nd. 1854. Died Feb. 24th. 1865.

HISTORY.—(ANTE MORTEM.)

John E. Stover, was admitted from the front, after having suffered according to his own statement from the effects of malaria for several months, during which time he was a patient at the Post Hospital. He was suffering from chronic diarrhœa and general exhaustion of vital powers. Has no chills but has frequent dejections of slimy and partially fœcal matter. He was placed upon stimulant tonic treatment, consisting of quinia, tannin and morphia. He improved under treatment but his diarrhœa returned at intervals with usual severity, the various preparations of mineral astringents and tonics being

used without effect. Counter-irritation and injections were only of temporary effect, occasionally the patient manifested symptoms of mental aberration which at the time were attributed to effect of the narcotics. His appetite was capricious, but he made no complaints from the effects of any thing eaten. He complained of pain in an undefined part of the lower portions of the abdomen almost continually, about twenty-four hours before death he was attacked with convulsions. Muscular rigor extending over the entire body, occasional jactitation and entire want of intellectual association, symptoms manifestly due to some morbid change in the great nervous centres. Active counter-irritation was applied to the upper part of the spinal column. Sedatives also were administered internally, the effect of which was only temporary. The patient remained in a state of perfect indifference unless aroused; when he became much excited. This condition remained until death relieved him.*

Case reported by

W. G. SMULL,

A. A. Surgeon, U. S. A.

—o—

POST MORTEM,

Six hours after death.

Body much emaciated, little rigidity.

BRAIN.—When the skull cap was removed 2 oz of fluid came from the sac of the arachnoid. Substance of the brain flexible; it was not whitened, but upon section numerous blood spots were observed. The commissural substance of the brain was flesh colored delicately, (a pale pink.) The substance generally was firm. No middle commissure in third ventricle; serum was found in the lateral ventricles in small quantities. In floor of 4th ventricle a V-shaped discoloration was observed of reddish color, $\frac{1}{8}$ inch in breadth and fully a line in depth; the arms of the V were about $\frac{1}{2}$ inch long each. Very near the point there was slight roughness to the touch. The membrane on floor of fourth ventricle appeared to be slightly thickened

*—This man at one time, about forty-eight hours before death, screamed violently, shrilly and at periods of about one minutes interval, so as to startle patients in the lowest wards of the National Hotel Building.

and to yield upon pressure. Weight 42 oz.; measurement 7 inches. Cerebellum not as much congested as cerebrum.

LUNGS.—The posterior portion of the lower lobe left lung was hypostatically congested, showing a red carnified section covered with bright red blood. Quite a quantity of melanic matter was found on the surface of this lung. A few of the lobules were of a dark color, quite solid to the feel, but easily filled with air by forcible pressure upon another portion of the lung. In right lung nothing abnormal was observed, with the exception of some red bands, but the lobes had an abundance of melanic matter on the surface, and one calcareous body was presented. Serous fluid was found in both pleural sacs in large quantity. Right lung weighed 11 oz.; measured $9\frac{1}{2}$ inches. Left weighed 11 oz.; measured 9 inches.

HEART.—No clots. Substance presented a glistening appearance. The pulmonary artery had its lining membrane reddened. The aorta presented the same phenomenon. Fat upon the surface of organ was reddish. In the pericardial sac there was a small quantity of serous fluid. Weight 6 oz.; measurement $3\frac{1}{2}$ inches.

LIVER.—This organ the smallest yet seen as indicated by measurement. It had a capsule with difficulty torn loose and was marked along the course of its blood vessels, superficially with broad white lines. Its substance was shiny and nearly homogeneous, the large hepatic vessels adhered somewhat more firmly than usual to their proper channels. Weight 27 oz.; measurement $8\frac{1}{2}$ inches.

KIDNEYS.—Normal. One of the supra-renal capsules of large size had a yellowish white substance externally, with a dark cherry colored substance internally. Right kidney weighed $3\frac{1}{2}$ oz.; measured 4 inches. Left weighed $3\frac{1}{2}$ oz.; measured 4 inches.

SPLEEN.—Small size; externally of light color, presenting a fibrinous appearance under its capsule, which was somewhat thickened, opacified and marbled. Substance of the spleen itself was of dark violet or cherry red color and somewhat firm in consistence. Trabeculae clearly marked. Weighted 4 oz.; measured 5 inches.

PANCREAS.—Flexible and of a reddish color. Weighted 1 oz.; measured 6 inches.

INTESTINES.—There was great thickening of the rectum and in the sigmoid flexure of the colon: and as high up as the transverse colon; with a red granulated surface. There was observed also a white rough surface in the sigmoid flexure. A dark surface appeared above this with region of ulceration. The thickening of rectum was to about four lines. In upper part of the sigmoid flexure one ulcer perforated the mucous membrane decidedly. Specimen preserved. The remainder of the intestines was considered normal. Intestines had generally a pinkish color.* Weight 55 oz.

[CASE NO 27.]

HOSPITAL NUMBER, }
2. 891, }

Gilbert Shaumway, Priv. Co. C, 10th New York Heavy Artillery, age 28 years; was admitted December 26, 1864, and died Feb. 27 1865.

HISTORY.—(ANTE MORTEM,)

The patient had a contusion over the right eye. Slight local inflammation supervened which on the following day was followed by erysipelas. This was treated with local application of acetate of lead and internally with Tinct. Ferri Chlorid. In forty-eight hours all symptoms of erysipelas disappeared and desquamation ensued. The patient at this time manifested slight mental aberration. Subsequent to this, partial unconsciousness ensued. The treatment during this period was counter-irritants and revulsives.

Case reported by Cadet for W. G. SMULL,
A. A. Surgeon, U. S. A.

POST MORTEM,

Twenty hours after death.

Much emaciation, slight rigidity of muscles.

BRAIN.—Aboreescent congestion on floor of 4th ventricle.

*— The specimen was considered one of cancerous disease, although no microscopic examination was made of it.

Two small clots of blood equal together to a *minim* were found over the Pneumogastric Lobule. Serum was found in lateral ventricles. Fornix was so softened as to be readily broken up. There was a pinkish hue of the commissural substance generally. Some ingestion of the pia mater and a considerable quantity of serous fluid were found under the visceral arachnoid.

LUNGS.—Left lung congested in the inferior lobe. About the middle of the outer border of lower lobe there was a small abscess surrounded indefinitely by congested and ecchymosed tissue the effect of actual effusion of blood apparently. Right lung congested in posterior portion. Seroid fluid was found under the visceral pleura, detaching it to some extent from the lung, and old pleuritic adhesions connected the detached pleura to the parietal pleura. The congested pulmonary tissue of right lung was dark red, somewhat mottled, and yielded a bloody serum upon pressure. Weight of right 22 oz.; measurement 9 inches. Left 14 oz.; measurement 8 inches.

HEART.—A clot observed in left ventricle was of a granular appearance. It was attached to the anterior aortic valves having little or no connection with the anterior cusp of the bicuspid valve, aorta was found reddened internally as were also the surfaces of cusps and tendinous cords generally. A clot arose from the anterior cusps of the tricuspid valve and extended into the pulmonary artery. Weight 10 oz.; measurement $3\frac{1}{2}$ inches. Blood, generally fluid.

KIDNEYS.—Masses of white substance were met with in both kidneys varying in size from that of a pins head to that of a pea, somewhat firm in consistence and of yellowish fibrinoid material; others exhibited a puruloid substance. Right weighed 6 oz.; measurement 5 inches. Left weighed 6 oz.;—measurement 5 inches.

SPLEEN.—Along the anterior and exterior border of this organ there was a region of lighter color than what seemed the normal portions, having an irregular, coast-like, defined and elevated border. There were two such regions, one superior. Upon section the lower region extended, cone-like, to the internal surface of Spleen, while the upper region extended squarely three-fourths of an inch into the tissue. That part termed normal was mottled, ingested and firm. Weight 1 lb.; measurement 6 inches.

LIVER.—This was of shiny, nearly homogenous section and dark color, presenting no apparent disease. Internal surface slightly mottled. Gall was perfectly black. Weight 27 oz.; measurement $8\frac{1}{2}$ inches.

SUPRA-RENAL CAPSULES.—Between the left and the kidney of same side, under the transverse fascia, quite a large abscess was observed. This capsule was much enlarged.

PANCREAS.—Somewhat enlarged and reddened. Weight 4 oz.; measurement 8 inches.

INTESTINES.—Lower part of the ileum was found congested, so also the large intestine. The mucous membrane was readily detached in the upper part of the ileum. There was a blackish gray discoloration in jejunum. This color was partly washed off and the water used became blackened. Some congestion was observed in the fundus of stomach. Weight 4 lbs.

[CASE No. 28.]

HOSPITAL NUMBER, }
162.

Jacob Newburger, Age 26 years, Private Co. F, 1st Md. Vols.; admitted from City Point, February 11th 1865; wounded at Hatcher's Run, February 6th; died March 1st, 1865.

DIAGNOSIS.

Gun-shot wound right side of thorax, just beneath spine of scapula. Ball remains in the wound.

HISTORY.—(ANTE MORTEM.)

Newburger admitted as described. Exploration of the wound by probing only revealed an opening through the scapula, below which, examination was deemed injudicious on account of the proximity of the lung posteriorly. A few days after admission tumefaction began near the spinal column, in the cellular tissue, covering it; this tumefaction increased until fluctuation became manifest. An incision of an inch in length was made at the point where the wall was thinnest and discharged about twelve fluid ounces of pus. This discharge continued and was very profuse for about five (5) days when hemorrhages super-

vened from the posterior opening. These occurred daily at times, until patient gradually sank from exhaustion.

Case reported by

W. G. SMULL,

A. A. Surg., U. S. A.

—o—

POST MORTEM,

Eight hours after death.

Great rigidity of the muscles. Somewhat emaciated.

BRAIN.—About two ounces of serum were found in the sac of, and under the visceral layer of, the arachnoid. The surface of the brain was somewhat reddened viewed with the pia mater on; this, the pia mater, was readily detached. The brain substance was found somewhat injected; puncta were found numerous and bleeding; the substance was of firm consistence, standing like wax. About two drachms of fluid were found in the left lateral ventricle and serum was observed in the 5th also in the 3d and 4th ventricles, a small quantity only in the latter, much having escaped from this in removal of the brain. Serous membrane of the 4th ventricle had a dull white appearance. Brain weighed 50 ounces; measured $6\frac{1}{2}$ inches.

LUNGS.—Right lung apparently normal. In the lower back part at the bottom of the lower lobe of the left lung about 1-5 of the whole was solidified; easily broken up and yielding a grayish dark colored and reddish pulp, at the same time the exterior of this portion had a lobulated feel. A portion of the lower anterior portion of the upper lobe equivalent to $\frac{1}{8}$ of lobe was solidified in like manner, advanced however, so far, as to yield upon breaking up a lighter gray pulp. A cut portion of the solidified part sank in water. Seroid fluid was observed in the pleural sac. Right lung weighed 14 ounces; measured 10 inches. Left weighed 18 ounces; measured $8\frac{1}{2}$ inches.

HEART.—About an ounce of fluid was found in the sac of the pericardium; a large white clot was found in the right ventricle attached in the usual way; with flaps, the opposed surfaces of which were smooth; and the open face of their angle was directed upwards and to the left. In the left ventricle one thromb clot was found arising from the anterior cusp and extending into the aorta; a black clot was observed in the

left auricle and a mixed one in the right. Auricular septum imperforate. Heart generally of tinged red color; the lining membrane of the vessels was red also. Heart weighed 12 oz.; measured 5 inches.

LIVER.—This organ was of light brownish red color; of firm consistence and yielded strongly the peculiar odor. Bile nearly black and fluid, about one fluid ounce in the bladder. Liver weighed 68 oz.; measured 11 inches.

SPLEEN.—Of somewhat light color and finely mottled on section. Substance nearly normally firm. Weighed 8 oz.; measured 5 inches.

KIDNEYS.—Left kidney small and of light color. Right much larger with somewhat more blood but still of light color. Right kidney weighed 4 oz.; measured 4 inches. Left weighed 5 oz.; measured $4\frac{1}{2}$ inches.

INTESTINES.—Some discoloration was observed in the caecum. The large intestines otherwise were normal. Ileum somewhat ironed and red in spots. Mucous membrane thinned but the muscular tissue is not readily uncovered. The upper part of the jejunum and the duodenum discolored and yellow.

PANCREAS.—Normal. Weighed 2 oz.; measured 4 inches.

THE WOUND.—The ball entered the scapula near the origin of the spinous process passed forwards, inwards and to the left at an angle of 60° , struck between the angles of the 5th and 6th ribs bearing more heavily upon the 5th; was reflected upwards, forwards and to the left, breaking the spinous process of the 5th dorsal vertebra and lodging under the rhomboid muscle beneath the deep fascia on the left side. A large piece of blue cloth carried into the wound lodged on the right side of the spinous processes. A sac filled with black matter, in great part clotted blood, averaging in breadth from 2 inches in the crevical region to 3 inches in the scapular, and 4 inches in the dorsal and 14 inches in length (extending from the 5th cervical to the 1st lumbar vertebra) was observed.* On the left side confined by the deep fascia was an abscess extending from the last cervical vertebra to 6th dorsal, about one inch in breadth.

THE SPINAL CORD.—Having cut through the laminae the

*—The matter that was thrown out of this sac was very offensive in smell and of a granular, brownish red, old appearance.

spinous processes were removed. The large veins near the lamina that was broken by the ball were found.

The torn extremities of a vein were seen. The torn vessel was found white, and old looking near the point of injury. A dark clot mixed with a white clot inferiorly was observed near the point of injury; the anterior face of this clot was firmly attached to the dura mater of the spinal cord. The pia mater here was congested arborescently in a similar manner to a portion observed below the medulla, finely and reticulately. The arachnoid was reddened and opacified. It was thought that the substance of the cord was somewhat thickened and of an abnormally dark color. The substance was of firm consistence; there was no inflammatory exudation matter. Specimen preserved.

[CASE No. 29.]

HOSPITAL NUMBER, }
169.

Nathan M. Hildreth, Company B, 94th New York Volunteers, aged 21 years.

HISTORY.—(ANTE MORTEM.)

Patient was admitted to the Hospital February 11th, 1865, with left thigh amputated primarily at the middle third consequent upon gun-shot wound received at the battle of Hatcher's Run, February 7th, producing a compound fracture. Operation performed on the field, Feb. 8th. When admitted the patient's general condition was very favorable, though the appearance of the stump was pale. Moistened oakum was applied with solution of Chlor. Zinc as a wash. About the 20th of February there was considerable irritation of the system manifested by small and frequent pulse, coated tongue, headache, impaired appetite &c., the eyes and skin presenting a yellow hue and the stump looking more unfavorable.

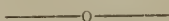
February 24th.—Intense pain in the right side; liver enlarged and painful, and a friction sound denoting pleurisy was heard; a slight chill. From 20th had been taking quinine, iron and brandy with beef essence.

February 26th.—Pleurisy extending to the left side: chills each day growing worse and more violent, fixing the symptoms of Pyæmia, succeeded by profuse perspiration. Died March 4th, 1865.*

Case reported by

J. G. KELLER,

A. A. Surg., U. S. A.



POST MORTEM,

March 4th, 1865, 4 o'clock, P. M., eight hours after death.

Body in good condition; of fine form; little or no emaciation; considerable rigidity of muscles. Pleuritic adhesions on the right side anteriorly and posteriorly were found. No adhesion of the pericardium.

LUNGS.—The lower lobe of the right presented numerous collections of a viscid puruloid substance in cavities of an irregular or spherical form met with chiefly near the outer pleural surface, but also deep in the lung substance. When met with in the substance they were nearer the pleural surface than the centre, generally giving the appearance of pulmonary abscesses pointing in direction of pleural sac externally. The fluid found in them varied from a sero-puruloid, pearl colored substance to a sanious pus. In separating the united surfaces of the visceral and parietal pleuræ bounding this lobe a small opening was made in one of the larger cells of pus, from which there was free discharge. The fibrin connecting the said united surfaces was thick and white; heart clot like, elastic and tough. It extended somewhat between the uppermost and lowermost lobes, but did not extend to the anterior surface of the lung. In the uppermost lobe two metastatic abscesses were found in the anterior inferior portion, but no inflammation of the pleura was observed in this region.

The middle lobe of this lung was separated by a posterior cleft only and the two abscesses referred to were in the obliterated

*—Metastatic abscess of the lung was declared before death in diagnosis. The chills were extraordinarily severe and were more frequent directly as dissolution approached. The very severe pain complained of and the anxiety, tremors and general nervous sensations were overcome, and the patient was made perfectly comfortable by a hypodermic injection of acetate of morphia, a quarter of a grain. Childreth's mind was clear until his final coma and very alert.

ated line of separation. The whole lung seemed filled with an aqueous fluid exuded into the connective tissue so that parts unaffected by disorganizing lesion were heavier than natural and doughy. Substance of the left lung similar to that of the right, just described. The anterior inferior border of the lower lobe of this lung was mixed with an elastic firm whitish mass of fibrinous material. A collection of sanious pus was observed superiorly through the middle of sac containing which a vessel passed to the inferior fibrinous mass referred to. The mass described as fibrinous upon minute inspection appeared composed of pulmonary substance having cells filled as in pneumonia and having in the middle of it a small mass of what was apparently effused blood. Upon pressure a puruloid substance was effused from many points as if from sections of ultimate lobules. The more normal substance in addition to being generally loaded with blood and having a doughy feel was specially loaded in the lower lobe and the posterior portion of the upper with blood. Another abscess was observed in the lower portion of the left lung, in which the matter had a bluish appearance, being at the same time viscid and puruloid. Left lung weighed 1 lb. $12\frac{1}{2}$ oz.; measured 9 inches.

NOTE.—Hildreth appeared to be more than ordinarily intelligent. Spoke grammatically and exhibited a sharp interested attention when any fact of importance was mentioned to him, although at the time exceedingly ill.

BRAIN.—Clear serum was seen in both lateral ventricles. In left side posterior horn extended back an inch farther than on the right. Corpus callosum thin and soft. Brain was found in other respects apparently healthy. Double soft commissure in the third ventricle. Weighed 3 lbs. 9 oz.; measured $7\frac{1}{2}$ inches.

HEART.—This contained clot in the right side, attached to that portion of the right ventricle in which there are musculi pectinati throwing all the blood from the right auricle directly over the smooth approach to the pulmonary valves. A clot was observed arising in the right auricle, connected with the auricular appendix. There was a small white clot in the left ventricle closely connected with the bicuspid valve, connecting with clot originating in left auricle; ear marked near aortic valves. Weighed $7\frac{1}{2}$ oz.; measured $4\frac{1}{2}$ inches.

LIVER.—An abscess one inch in diameter, of irregular form was observed in the right of the right lobe of the liver. This was also deep seated. Anterior part of this organ, right lobe, was somewhat enlarged and of more granular appearance than usual, breaking up and exhibiting the acini very readily. The liver was generally of a light color, mottled and finely congested on the surface. It was thought that signs of commencing disease such as would lead to an abscess, similar to the one observed in right lobe existed in the portions described as finely congested. Weighed $5\frac{1}{2}$ lbs.; measured 11 inches.

SPLEEN.—Of a light color; flexible, exhibiting upon section a speckled condition, especially in tissue of the dorsum, the speckling being caused by what appeared upon close examination to be numerous spots of blood, the results of extravasation.

N. B.—The patient complained of pain upon percussion over the spleen. Organ weighed 12 oz.; measured 6 inches.

KIDNEYS.—Of a light color, flexible and easily torn; no abnormality observed. Right kidney weighed $7\frac{1}{2}$ oz.; measured 5 inches. Left weighed $7\frac{1}{2}$ oz.; measured $5\frac{1}{2}$ inches.

PANCREAS.—Apparently normal. Weighed $3\frac{1}{2}$ oz.; measured 8 inches.

INTESTINES.—With the exception of a few blood spots and some thinning of the mucous membrane the intestines were natural. Weighed 4 lbs., 11 oz.

THE WOUND.—In the extremity of the femoral artery, in the amputated thigh, extending to the distal artereal branch, a clot was found, the lower part of which, was honey-combed, below which there was a small patulous sac. In the femoral vein there was a clot extending from the junction of the profound vein to the extremity of the vessel; black and loose below, between the attachment and extremity.

Specimens of the lung, double commissure of the brain, and blood vessels of the thigh were preserved.

[CASE No. 30.]

HOSPITAL NUMBER, }
2. 356. }

George Shearer. Private Co. I, 8th Ohio Volunteers; admitted for burial. Was killed by cars on N. C. R. R. near Mt. Washington, Md., on the 3d March, 1865. Residence :---Napoleon, Henry Co., Ohio.

The body was sent to Major Weigle, Provost Marshal, who delivered it for burial at the National Hospital.

POST MORTEM,

March 4th, 1865.—BRAIN.—Blood was observed in sac of arachnoid, and beneath the same; many puncta were observed in brain substance; some blood was also found in the lateral and fourth ventricles. Brain weighed 3 lbs.; measured 7 inches.

LUNGS.—The right was torn in the upper and back part of the lower lobe; left was found uninjured.

THE FRACTURE.—Occipital bone was broken; a quadrilateral fragment was separated about the Torcular Herophili, the lower portion or base of which involved the Foramen-Magnum in great part. There was complete separation along the base of skull between its two halves, the fracture isolating the sella turcica.

[CASE NO 31.]

HOSPITAL NUMBER, }
286, }

J. T. St. John, Acting Asst. Surg., U. S. Army.

HISTORY.—(ANTE MORTEM.)

INDIANAPOLIS, IND., March 16th, 1865.

DOCTOR :—

In obedience to your request I give you the following history of Dr. J. T. St. JOHN during the time he was under my care. He came aboard the "John Rice" at Aikins Landing, March 1st, at 2 P. M. I immediately examined him and found his pulse about 120, feeble; countenance pallid and anxious; complete aphonia and great dyspnoea. The trachea and fauces were lined with a thick tough false membrane which interfered with both deglutition and respiration. I at once cauterized the throat well with Arg. Nit. fus., which disengaged

large quantities of the false membrane, enabling him to breathe and swallow much easier. I gave him thirty gtt. Tinct. Ferri Chloridi every three hours together with Quin. Sulph., gr. 3; Potass chlor. gr. 4, and Pulv. Doveri gr. 5. I applied externally Vol. Lin. and gave him freely of brandy and beef essence. This constituted the treatment up to the time I sent him to the Hospital at Baltimore. For the first 12 hours he seemed to improve and gave slight hope that he might recover; after that time he grew worse all the time I was with him. He lived longer than I expected.*

Respectfully, Yours &c..

W. P. PARR.

P. S.—He had been sick five days before I saw him.

P.

To

*Surgeon in charge of
National, U. S. A. Gen. Hospital,
Camden Street, Baltimore, Md.*

Age about 25 years; of ordinary muscular development; was brought by steamer from City Point, and admitted to this hospital March 3d, 1865. He was much exhausted and prostrated; countenance anxious and presenting a slightly venous hue. There was dyspnœa and partial aphonia; he had to be propped up in bed, and what he said could not be understood unless the ear was closely inclined to him. Partial paralysis of the left arm was observed, and he complained of tenderness on pressure over the wrist. Examination of the throat revealed a grayish white exudation over the tonsils and soft palate. On account of the difficulty in breathing and speaking, a full and exact history of the case could not be obtained from the patient. He stated that he had been attacked about ten days before with sore throat; the white exudation made its appearance. A strong solution of nitrate of silver was applied, and it removed the exudation; it returned, and the solution was again used, but not with the same good result. His voice was not materially affected till the day before admission. He had been taking the Tinc. Ferri Chlor. 20 drops every 3 or 4 hours with brandy and beef tea. There was a phthisical element in his family, and he had suffered occasionally with laryngeal trouble. At the suggestion of Assistant Surgeon McGill, U. S. A., in charge of Hospital, 10 grs. of capsicum and a tea-spoonful of mustard were given as an emetic. That not acting, a scruple of the

* — Letter written in response to request for particulars.

sulph. of zinc was administered. Vomiting resulted, and some of the shreds of the false membrane were got rid of, but with very little result to the patient. Dr. McGill recommended that a concentrated solution of capsicum be used as a local application to the throat. This was applied with a probang every 3d hour, and capsicum used externally over the larynx. The iron brandy and beef tea were continued. During the afternoon and evening the Doctor had several copious serous alvine evacuations, which he ascribed to the emetic; at night was anxious, nervous and restless; 30 drops of tr. opii. administered per anum; the diarrhoea was checked, the nervous symptoms quieted, and sleep induced. During sleep respiration was noiseless.

March 4th.—Condition about the same; the exudation was diffused, and a considerable quantity of it was expectorated, some shreds being of quite firm consistence, and presenting a cartilaginous appearance.

The lungs were resonant on percussion, and the respiratory murmur heard over all parts of the chest. Deglutition could not be effected. Local constitutional treatment continued. At night was worse; more feeble, restless and nervous; making continued efforts to get rid of the obstruction in the air passages, with only partial success; $\frac{1}{4}$ gr. morphia was given, and the dose repeated. During the night he slept a little, but was somewhat delirious; this he ascribed to the morphia.

March 5th.—Said his throat was better, but there was some oppression about his lungs. The tonsils, uvula half arches and epiglottis still covered with the exudation. His voice was about the same as when admitted. On auscultation marked difference was observed in the distinctness of the respiratory murmur on the right and left sides. Over the right lung it was much more feeble than over the left. A mixture of mustard and turpentine was applied over the chest and throat. By advice of Dr. McGill, a blister was put on each deltoid muscle. In place of the red pepper, liq. ferri per sulph. was applied with a probang every 3d hour to the throat. In the afternoon a portion of the exudation had been removed, and the rest appeared somewhat detached but the general condition of the patient was more unfavorable. During the night he became much worse; carb. ammonia was given.

March 6th.—Death evidently impending. The face an

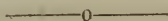
hands were of a venous hue; breathing loud and hoarse; pulse feeble; the intellect was not affected. The respiratory sound was perfectly distinct over the left lung, and but barely perceptible over the right. The presence of a greater quantity of exudation matter in the right than the left bronchial tubes was suggested as an explanation of this difference in the respiratory sounds.*

12 M.—Patient dying; respiration continued after the heart's action had apparently ceased.

Reported by

G. H. DARE,

A. A. Surgeon, U. S. A.



POST MORTEM.

March 6th, 3½ P. M.—Body still warm, but slight emaciation.

LUNGS.—The left lung presented a peculiar mottled appearance, the mottlings varying from the light color of pulmonary tissue to a dark cherry red, and blood red. When section was made in the cherry red tissue, the cut surface presented a fleshy appearance, (upon minute inspection exhibiting, as was thought, fine points of ultimate lobules, with difficulty seen;) and upon pressure there was exuded from the same cut surface a great quantity of bloody, aqueous liquor, apparently allied to exudation serum. A portion of the tissue presenting these appearances, sank readily in water. When adjacent, more healthy pulmonary tissue, was pressed, so much air made its appearance in the consolidated lung substance, as to define the pulmonary lobules. In this lung, formed between the lobes in an unusual lobe division in the upper part of the inferior lobe, an apoplectic clot about ½ cubic inch in amount was observed near a vessel in which no orifice was seen. Several spots besides were found, not only in the inferior lobe, but also in the superior of this side, presenting in one case blood, in the other cases ecchymoses. In bronchial tubes of left lung, lying collapsed, easily torn and longitudinally lined, a shred-like fibrinous substance was observed connecting in continuity with the main tube described below as existing in the trachea.—

*This suggestion was made by Dr. Dare.

This substance in the bronchial tubes of the lung formed a tree of corresponding hollow involucred tubes. In right lung similar appearances were presented, except that what were regarded as apoplectic spots, were absent. The lowest lobe of the right was more intensely affected by collapse as evidenced in the appearance noted as cherry-colored substance, than any other lobe of the lungs. In this lung the bronchial tubes to those of 3d magnitude, and even farther, were occupied by hollow, fibrinous tubes, and the vacant tubes of lesser magnitude presented an abnormally white appearance. These fibrinous tubes were best developed in the tubing, supplying the lower and middle lobes. Right lung weighed $32\frac{1}{2}$ oz.; measured $8\frac{1}{2}$ inches. Left lung weighed 28 oz.; measured 8 inches.

TRACHEA.—From the soft palate and half arches, tonsils, the upper part of the pharynx, the root of the tongue, and sides of the laryngeal opening, and from the epiglottis, a white or ash-colored substance closely adherent to the originating tissue, in thickness varying from $\frac{1}{4}$ line to more than a line from above downwards, covered the internal surface of the trachea, and right and left bronchial tubes, so as to form a complete second or inner tube of what would, in common parlance, be called *false membrane*. The surface of the lower part of the main tubes, covered by this membrane was scarlet; and it was thought that in the spots of deeper scarlet, there was fine granulation.* In right bronchus the tube of false membrane was two lines in thickness; in the left not more than $\frac{1}{4}$ line.

On close examination of the cut surface of the main tube, in right bronchus, and superiorly of shreds, it appeared as if the structure of this tube was laminated. Superiorly about the epiglottis, in the upper part of larynx, and in the pharynx and fauces, the membrane was ragged. The interior of the main tube, as seen in the trachea, was perfectly smooth and shining, presenting in this respect, almost the appearance of serous membrane; and the left bronchial membrane tube and the trachea membrane tube were large enough to pass air enough to the lungs to support life; for which passage, however, the tube supplying the right lung was not sufficiently capacious.

HEART.—A mixed clot of large size was found in the right auricle communicating with a clot in the right ventricle of pyra-

* — This opinion was unanimous.

midal form that arose in apex of ventricle, and had two columns, one a communicating column colored black, connecting with anicle clot; and another also black running into pulmonary artery. The pyramid from which these columns arose was composed of tough, white clot substance. In left anicle there was a black clot; in left ventricle a small white clot, arising by its apex in the ventricular apex, and joined the anterior cusp clot. Heart normal in other respects; organically, quite full of blood. Weighed $12\frac{1}{2}$ oz.; measured $3\frac{3}{4}$ inches.

BRAIN.—Pia mater much congested in veins and capillaries; consequently the cerebral surface was much reddened. Substance of the brain was quite firm; also well filled with blood. Small quantity of fluid in right lateral ventricle. No commissura mollis. On the floor of 4th ventricle, on right side above the origin of the auditory nerve, there was an aborescent spot of congestion. A central vessel was found proceeding from the direction of the right cerebellum $\frac{3}{4}$ of an inch long, with six or eight (four main) descending vessels, and two main ascending ones.* Intense congestion of the capillaries of the pia mater, covering the upper portion of the spinal cord; congestion (slight) of the substance of the pons. Two ounces of serum flowed out when the sac of the arachnoid was opened. Brain weighed 3 lbs. 14 oz.; measured 10 inches.

LIVER—Was of dark color, quite full of blood, giving rather light colored bile. Weighed 3 lbs. 14 oz.; measured 10 inches.

SPLEEN—Of natural size; if anything a little small; markedly light colored in comparison with liver. Weighed 4 oz.; measured $5\frac{1}{4}$ inches.

KIDNEYS—Somewhat congested; otherwise natural; capsule readily detached.

SUPRA RENAL CAPSULES—Apparently normal. The left contained some bloody looking matter in sac. Right kidney weighed 6 oz.; measured $4\frac{1}{2}$ inches. Left kidney weighed $6\frac{1}{2}$ oz.; measured $4\frac{1}{2}$ inches.

INTESTINES—Glands in the cecum, well developed; the cecum itself slightly congested; Peyer's patches slightly reddened (scarlet;) ileum of light gray color; generally, the summits of the solitary glands and edges of mucous folds were reddened; slight dark discoloration in the lower part of the jejunum; the jejunum in middle and upper part scarlet or

pink; especially in region of strongly developed valvula conniventes. The duodenum in the upper part was dark colored. The stomach was ash colored internally, and presented cherry colored spots, and what seemed to be more clearly congestions or ecchymosis, under the mucous membrane. Blood was met with clotted in the large vessels; this clotting was not so great as to prevent a free flow of blood from the large veins when these were cut.

PANCREAS—Normal, except in a slight congestion near its head. Weighed $2\frac{1}{2}$ oz.; measured 7 inches.

The urine was examined and found to contain albumen.

Specimens of larynx trachea and bronchial tubes preserved.

Autopsy by

GEORGE M. M'GILL,

Asst. Surgeon U. S. A.,

Surgeon in Charge.

[CASE No. 32.]

HOSPITAL NUMBER, }
266. }

William Doty, age 27 years, Private Co. D, 91st New York Vols.; admitted to this Hospital, March 2d, 1865.

HISTORY.—(ANTE MORTEM.)

A friend of the patient's states that he (the patient,) was a man of temperate habits and social disposition. On entrance into Hospital, patient presented no signs of disease whatever. According to his statement, he had been afflicted for seven years with epilepsy, and had a fit on the day previous to his admission.

March 4th.—Had fever; severe pain in the left side, and faint friction sound over lower lobe of left lung anteriorly. A blister was applied and a large dose of Dover's powder given.

March 5th.—Complained very little, and seemed to be getting along well through the day but at night was delirious.

March 6th.—Extremely restless, tossing about in bed. During the absence of the nurse would get up and wander about the room; pulse feeble and rapid; eyes fixed; and pupils nat-

ural but insensible to light. Blisters were applied to the nape of the neck, and opium given internally. The opium produced no change of the pupil of the eye. The head was thrown back and rigidly held by the posterior muscles of the neck.

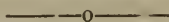
March 7th.—No change in symptoms; head still retained towards the back.

March 8th.—Died early in the morning.

Case reported by

J. G. KELLER,

A. A. Surg., U. S. A.



POST MORTEM,

Seven hours after death.

BRAIN.—Congestion externally of capillaries and veins of pia mater; little or no fluid found in sac of arachnoid. The arachnoid, clear and smooth on the visceral surface, contained beneath it, especially along tracts of the larger pia mater vessels, white and fibrin-like substance.

Lateral ventricles being opened in each of the anterior cornua, about three drachms of fluid were observed. In the left there was rather more; and at the bottom or fundus of each anterior cornua, about half a drachm or less of bluish puruloid substance was found. In posterior cornua (middle and posterior,) about two drachms of fluid mixed with about one drachm of similar puruloid substance (adherent, in part, quite closely to the walls of cornua, and making in all nearly three drachms of sero-puruloid fluid,) were found in each. A grayish appearance with somewhat dark general color, was presented in choroid plexuses. Upon the walls of the lateral ventricles, amid fine congestion and aborescence, especially posteriorly, and on the walls inferiorly, connected with the finely congested vessels, there were numerous small spots of ecchymosis. These were more numerous on the left than right side.

The membrane lining the bottom of lateral ventricles was readily broken up in both the anterior and posterior cornua, and had lost its usual shining appearance in great measure.

In superior portion of left lobe of cerebellum, one inch within posterior semi-circular border, there was a small clot from which blood vessels radiated irregularly. On right side in

similar position, there was a second clot. On right hand side of posterior cleft (valley) of cerebellum, a thin small clot was observed. The floor of the fourth ventricle was covered with a bluish, tenacious, viscid, slightly tart puruloid substance.—When scraped with a knife, the membrane covering it remained dim. Fine irregular aborescent congestions were observed on the floor. These were arborescences of the fine vessel branches. The substance of the floor of ventricle appeared reddened. In the central axis of medulla oblongata in cross section, a red spot appeared. The inferior portion of the pons, between arachnoid and pia mater, and the perforated spaces and their vicinity, were covered, along the courses of vessels especially, with bluish fibrinoid substance.

Substance of cerebellum was congested as was the cerebral substance. Blood was found fluid throughout the body. Brain weighed 3 lbs. 4 oz.; measured 7 inches.

LUNGS.—The posterior surface of the right lung, superiorly and inferiorly, was somewhat uneven by undue prominence of certain lobules, and when the same surface was cleaned, it had a spotted appearance, due to the presence of ecchymosis beneath the pleura. Section in its middle revealed the extreme lobules bright red, and apparently well filled with air; more internally, dark substance. A portion of the superior lobe in anterior portion of right lung, sank in water.

LEFT LUNG.—Pleuritic adhesions were observed; interlobar and saccular. Some sub-pleural ecchymosis observed over surface; and in one part of substance of left lung, there appeared to be intense congestion, even to ecchymosis. Bronchial tubes reddened internally. Right lung weighed 1 lb. 7 oz.; measured 9 inches. Left lung weighed 1 lb. 3 oz.; measured $8\frac{1}{2}$ inches.

LIVER—Was full of blood, and very dark red inferiorly.—Gall bladder large and full, contained black bile. Liver weighed 5 lbs. 2 oz.; measured 12 inches.

SPLEEN—Large; of light color; very flexible, and easily broken up. Weighed 12 oz.; measured 5 inches.

PANCREAS.—Apparently somewhat congested. Weighed $3\frac{1}{2}$ oz.; measured $8\frac{1}{2}$ inches.

KIDNEYS.—Congested arborescently upon posterior surface. The renal pyramids were congested so as to present, upon sec-

tion, a kind of speckled appearance, indicating, probably, venous stasis; capsule not readily detached. Right weighed $7\frac{1}{2}$ oz.; measured $5\frac{1}{2}$ inches. Left weighed 8 oz.; measured 5 inches.

HEART—Very small; black clot in right auricle; large white clot in right ventricle, adhering to anterior wall; small clot in left auricular appendix of black color, though somewhat mixed; a few black clots in the left ventricle; substance of heart generally reddened. Weighed $12\frac{1}{2}$ ounces with clots; and with vessels attached, &c., measured $3\frac{1}{2}$ inches.

INTESTINES.—Large intestines, slightly reddened; regions of intense congestion in jejunum, duodenum and stomach.

SPINAL CORD.—Thirty three hours after death.

Dura mater and sac of the arachnoid were accidentally opened nearly opposite first lumbar vertebra. A seroid fluid mixed with flakes of lymph, to the amount of nearly one drachm was seen to pour forth when the theca was opened. Quite closely adherent to the surface of sac of arachnoid, and accordingly enveloping the spinal marrow, were bluish flakes of fibrin, especially posteriorly. No marked congestion in pia mater was observed. About the middle of dorsal region, a cross section revealed such softening of the proper substance of the cord, as if the substance itself had become puriform; and although the substance of the cord was freely opened, no spot of similar softening, (or consistence) was found. The anterior vein of pia mater and blood vessels in the bottom of anterior cleft of cord, were full of blood; especially in the latter position. Some spots of ecchymosis or exudation were observed a short distance above the softened spot referred to,

Albumen in large quantity was found in the urine.

[CASE No. 33.]

HOSPITAL NUMBER, }
308.

John Maquilla, Priv. Co. C, 11th Md. Vols.

HISTORY.—(ANTE MORTEM.)

Age supposed to be forty years. Was found in a bawdy house and reported by inmates to have died from an attack of mania a potu.

POST MORTEM,

About 36 hours after death.

No emaciation ; some rigidity ; no exterior marks of injury were found.

BRAIN.—Serum was found in the sac of arachnoid ; also beneath the visceraral arachnoid, and here in such quantity, especially on left side, that the visceraral arachnoid and pia mater were detached with great ease. Nearly transparent fluid observed in left lateral ventricle, anteriorly and posteriorly. A small quantity was also seen in the right. Choroid plexuses of watery red color, with light colored rounded portions apparently fibrinous. The floor of the fourth ventricle was dark colored ; had one spot of arborescent congestion in the centre and above auditory nerves ; had evidently contained serum.—Fornix was much softened ; so greatly that it could not be raised without destruction. There was apparently congestion of the striated bodies. Pia mater of cerebellum was finely congested ; substance of cerebellum was considered softer in consistence than the cerebral substance ; and the cerebellum was very flaccid.

The pia mater was detached with great facility from left cerebrum, and with facility from the right. The vessel forming the arborescence existing on the floor of the fourth ventricle, extended to the right side, forming an arborescence on that side. Brain weighed 3 lbs. $3\frac{1}{2}$ oz.; measured $7\frac{1}{2}$ inches.

HEART.—Communicating channel ;* in this organ between the right and left auricles, large enough to allow the passage of the little finger. Large mixed clot in right auricle communicating with vena cava. This was firmly attached to the pectinate cords and auricular appendix, in anterior portion of right auricle, and connected by an isthmus with a clot which bound together the cusps internally and inferiorly, of right ventricle. The latter clot was attached by an apex, to apex of ventricle.

* — The word channel is used to indicate a passage-way. This passage way was from behind, forwards from right to left, and its central axis, allowing for the position of the heart, would make an angle to the left of about sixty degrees with a transverse axis of the body drawn through the septum auricularum at right angles to the long axis of the body.

and extended a white, round, tough and ear-marked arm into pulmonary artery. This arm sub-divided with the latter. In left auricle, there was a large black clot; in left ventricle, there was a clot attached to anterior cusp of mitral valve, having an apex branch. This clot was mixed, strongly ear-marked near semilunar valves, and extended into aorta. Heart weighed 1 lb., with clots; measured $3\frac{1}{2}$ inches.

LUNGS.—On the left side there were old pleuritic adhesions; there were interlobar adhesion bands also. Anterior portion of left lung contained air, and had a light, somewhat watery color; the posterior portion of same lung was dark colored, and contained nodulations, the substance of which, sank in water, and yielded upon pressure from a cut surface, a bloody aqueous fluid. This fluid flowed more from the upper nodulations and superior pulmonary substance.

The pulmonary substance presented, upon cut surface of lower lobe, amid general dark red color, a conspicuous mottling from lobules, partly filled with air, and of a resultant light color. Lobules partly collapsed, apparently from serum outside of air cells were observed. Black spots or bloody regions, associated with the nodulations referred to above, were seen, which seemed to be results of ecchymosis or effusion.—These were more abundant in this lower lobe. On the right side, inferiorly, there were fine delicate, pleuritic adhesions.—About eight ounces of liquid were found in right pleural sac. On close examination, the visceral pleura was found dull, and covered with fine granulations, and a few lymph flakes. The lowest lobe of right side was hepatized, and thought to be in the first of the gray stage. When broken up, a reddish gray puruloid fluid was formed. A fine granulated appearance in this hepatized substance, on close examination, was observed.

The posterior inferior portion of the uppermost lobe was hepatized similarly. The hepatization here, merged into redly congested tissue, and that filled with serum, from below upwards. Right Lung weighed 4 lbs. $12\frac{3}{4}$ ounces. Left weighed 2 lbs. $12\frac{1}{4}$ ounces; measured 10 inches.

KIDNEYS.—Very flaccid; containing a large quantity of fat in and about the pelvis, presenting an indistinct structure on section. Cortical substance congested arborescently. Right kidney weighed 8 ounces; measured $5\frac{1}{2}$ inches. Left weighed 7 ounces; measured $4\frac{1}{2}$ inches.

LIVER.—Light red color, externally; dark red, internally; of firm consistence; presenting inferiorly in right lobe, a black congested portion, two lines in thickness or depth; a little of the same black congestion was observed on the lower anterior portion of the left lobe. Liver weighed 4 lbs. 9 oz.; measured $12\frac{1}{2}$ inches.

GALL BLADDER—Full of an amber-colored bile. The mucous membrane of interior of bladder was so softened as to be expressed with the bile. A cyst filled with granular caseous substance was found in the upper portion of the liver, which (the cyst) was preserved. Gall bladder weighed 2 oz. 5 drachms.

SPLEEN—Flaccid; capsule puckered, and dark colored, at either extremity; substance readily pulped. Spleen weighed $8\frac{3}{4}$ oz.; measured $5\frac{1}{2}$ inches.

PANCREAS.—Apparently normal.

INTESTINES.—Some discoloration in cæcum and ascending colon. Some softening and thinning of mucous membrane in ileum with regions of congestion. Gut of watery color in upper part of jejunum. Some redness succeeded by dark discoloration met with in duodenum. Pyloric extremity of stomach redly congested; dark gray discoloration of fundus. Mucous membrane not readily detached. RIGHT SUPRA RENAL CAPSULE examined and found in a pulpy condition. Pulp of red color, somewhat granulated.

[CASE NO 34.]

HOSPITAL NUMBER, {
320, }

John Ryan, aged 20, Private Co. B, 7th N. Y. II. A.

HISTORY.—(ANTE MORTEM.)

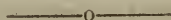
Patient was admitted Saturday, March 11th, 1865, in a comatose condition. Both parotid glands were swollen; pupils dilated and tongue coated. He could give no connected account of himself. It was stated by those with him, that he had been in this condition about two days. Revulsives, counter-irritation and stimulants were used without much apparent

benefit. On Wednesday the inflammation of the parotids abated somewhat, but constitutional symptoms remained unabated.— On Friday, 17th, patient died.

Case reported by

W. G. SMULL,

A. A. Surg., U. S. A.



POST MORTEM,

Six hours after death.

BRAIN.—Somewhat pale, externally; substance light colored and somewhat softened; serum in small quantity was found in lateral ventricles; congestion on the floor of the fourth ventricle, chiefly above the origin of the auditory nerves. There was a spot of congestion on the left side on the floor, inferiorly, apparently just beneath the lining membrane, of scarlet color, two lines in length and one in breadth. Arborescent congestion on both sides, superiorly, and centrally, inferiorly. Brain weighed 3 lbs. 1 oz.; measured $7\frac{1}{2}$ inches.

LUNGS.—In posterior portion, inferior lobe of left lung, a large quantity of tissue was observed in a condition of solidification, which tissue was easily broken up with the finger, but presented a fleshy section, and was not granulated apparently, upon close inspection. Depth of this diseased tissue about $\frac{3}{4}$ inch from behind, forwards. In posterior portion of superior lobe, a section revealed several little masses of coagulated blood, apparently due to apoplexy. Old pleuritic adhesions on the surface of the right lung. Tissue of the posterior portion, lowest lobe of right lung, to depth of more than one inch in central line, when detached, sank readily in water. The section of this tissue was mottled, and very full of blood and fluid. Mixed with false membrane of old pleuritic adhesions, several spots of effusion of blood, or of ecchymosis on surface of lung, were observed. Posterior portion of uppermost lobe of right lung, presented on section, a checkered appearance, due to the apparent fact that several vessels of the 6th or 8th magnitude, had congestions about their walls. This so-called fact was probable; for the terminations of these small vessels on the section surface, were observed surrounded by dark areolæ of ecchymosis. Substance of both lungs ingested with

blood. Right lung weighed 1 lb. 5 oz.; measured $8\frac{1}{2}$ inches.

LIVER.—Old adhesions between diaphragm and superior portion of liver, under which, extending into substance of the liver, was a hard, white, fibrinous mass, somewhat mixed with hepatic tissue, presenting the characteristics of an organized fibrine nodule. Organ generally, somewhat light colored; of firm consistence; shining on section, with black congestion, superficially, anteriorly and inferiorly. Liver weighed 3 lbs.; measured 10 inches.

HEART.—Imperforate auricular septum; organ small; tissue reddened, but otherwise normal. Blood flowed freely from the great vessels, and did not coagulate readily. Heart weighed 8 oz.; measured 4 inches.

SPLEEN.—Normal size; flaccid; brick-red dorsum; black internal surface. Presented about centre of dorsum, an L-shaped spot, of contracted, depressed, and apparently cicatricial tissue. Substance of spleen somewhat tough. Weighed 6 oz.; measured $4\frac{1}{2}$ inches.

KIDNEYS.—Left congested inferiorly; the columns (constituting pyramids) dark colored, inferiorly and posteriorly; right similar; somewhat fuller about the pelvis. Right weighed 4 oz.; measured 4 inches. Left weighed 4 oz.; measured 4 inches.

PANCREAS.—Small, and of a dull color. Weighed $2\frac{1}{2}$ oz.; measured 6 1-2 inches.

INTESTINES.—Dark color in descending colon; transverse colon, lead colored; in superior part of ascending colon, congestion; in ileum, a few red spots were met; mucous membrane, thinned; jejunum discolored; in the same there were observed congestion and arborescence, affecting even the valvula conniventes; fundus and cardiac orifice of stomach congested. The left parotid was examined, and found infiltrated with pus.

[CASE NO. 35.]

HOSPITAL NUMBER, }
No. 355. }

Wallace Wilder, aged 24; Private Co. H, 124th Ill., Vols.

HISTORY.—(ANTE MORTEM.)

Wilder was admitted March 11, 1865, with symptoms of cerebral congestion. Could be called to a state of only partial consciousness by raising him, with efforts more or less violent. Could give no account of himself, and made no complaint. His evacuations were involuntary; and food was taken only by the persistent efforts of the attendants. Revulsives and active counter-irritation to the back of the neck and spine produced no effect. Patient became gradually more insensible, and died on the 17th, 2 A. M.

Case reported by

W. G. SMULL,
A. A. Surgeon, U. S. A

 POST MORTEM.

5 P. M.—Fifteen hours after death.

Not much emaciation considerable rigidity of the muscular system.

BRAIN.—On taking out brain, about two ounces of a serous fluid flowed out of sac of the arachnoid; veins of the pia mater were congested; and this membrane itself was finely congested; congestion and slight reddening of the substance of the brain; some congestion in walls of the ventricles, especially in those of the posterior portions or horns; in third ventricle little serum was observed. The floor of the fourth ventricle was arborescently congested on both sides, below the origin of the auditory nerves; chiefly centrally above. Substance of brain flaccid; of normal consistence; cerebellum a little more flaccid and softer than cerebrum. Brain weighed 3 lbs. 9 oz.; measured $7\frac{1}{2}$ inches.

LUNGS.—Old pleuritic adhesions at base of the left lung; and there were also interlobar adhesions. This lung was uni-

versally congested, but not so as materially to exclude the air; which was present in all except a few lobules that were in a condition of atelectasis, (so to speak) and that were observed posteriorly in both lobes. Otherwise left lung was normal.—Bronchial tubes somewhat reddened internally, and covered with a shining mucous, apparently bloody. Right lung generally of a light color anteriorly, and of a dark color and more mottled, posteriorly; presenting a large patch of lobules, black and apparently in a condition of atelectasis, similar to that of certain lobules seen in the left lung. Hypostatic congestion posteriorly. The substance affected by this congestion has an œdematous feel. Right lung weighed 1 lb. 4 oz.; measured 9 inches. Left weighed 1 lb. 2 oz.; measured 9 inches.

HEART.—The auricular septum was perforate; the opening running from behind forwards, and to the left. Such a white clot was formed in the right ventricle as bound the valves to the apex tendinous cords and carneous columns, and directed the flow of blood wholly upon the smooth approach to the pulmonary artery. Heart somewhat loaded with fat, and its substance generally had a red tinge. The organ was otherwise normal; blood fluid. Heart weighed $12\frac{1}{2}$ oz.; measured $4\frac{1}{2}$ inches.

LIVER.—Somewhat dark red externally; presented on superior surface of right lobe, light and dark mottlings, the former from bands and spots, section through which revealed the whitened tissue extending to a very considerable depth. No softening in any of the whitened portions. Substance firm and well filled with blood. Left lobe lighter superiorly; was congested superficially, inferiorly; as was exterior inferior border of right lobe. Quadrate lobe was superficially (inferiorly) veined, mottled. Liver weighed 3 lbs. 11 oz.; measured $10\frac{1}{2}$ inches.

SPLEEN.—Very slightly enlarged; flaccid; congested black internally and superficially. Substance of somewhat firm consistence, tearing with slight resistance superiorly, but easily inferiorly. Weighed 10 oz.; measured 6 inches.

KIDNEYS.—Left flaccid, pale; arborescence of the surface; congested coarsely, having the tubular portions of the pyramids of a pale cherry color, or water red; in marked contrast with the pinkish or ash colored, cortical substance. Right similar

to the left. Over the surface of both inferiorly, black speckling was observed, due, probably to rectal capillary congestion. Left kidney weighed 4 oz.; measured 4 inches. Right weighed 5 oz.; measured 5 inches.

SUPRA RENAL CAPSULES.—Apparently normal.

PANCREAS.—Large and congested. Weighed $3\frac{1}{2}$ oz.; measured 5 inches.

INTESTINES.—Some congestion of large intestines; fine congestion of the ileum; Peyers patches enlarged, darkened and black pointed; mucous membrane thinned and granulated.

STOMACH.—Much congested; also duodenum and jejunum.

Intestines₇ weighed 4 lbs. 8 oz.

PAROTID GLAND.—The right gland was examined and found infiltrated with a puruloid substance.

LARYNX.—Apparently normal.

GALL BLADDER.—Normal; bile black.

[CASE No. 36.]

HOSPITAL NUMBER, }
316.

Patrick Conlin, age 36; private Co. E, 25th Massachusetts Volunteers.

HISTORY.—(ANTE MORTEM.)

Patient's nativity, Ireland; temperament sanguine; stature six feet; complexion dark; occupation previous to enlistment unknown. March 11th, 1865, patient was admitted into Hospital from Annapolis, Md., with symptoms of Typho. Malarial Fever. General conditions characterized by great prostration. Febrile symptoms were well established. Skin hot and dry; no appetite; much thirst. Pulse accelerated and easily compressible. Breathing hurried; tongue furred and dry. Headache exceedingly severe; bowels costive. Appearance of the countenance was peculiar, of dusky hue with injection of eyes. The mind seemed sluggish, and exhibited a degree of confusion. This mental condition rendered it difficult to ascertain duration of disease, also precise time and mode of attack. An eruption, somewhat peculiar, consisting of numerous spots varying in size from a quarter ($\frac{1}{4}$) of to a line in diameter ap-

peared, chiefly upon chest and abdomen. These spots, more or less elevated above the surface, disappeared in a few instances slowly and imperfectly under pressure.

March 13th.—Skin was found unusually hot, with little disposition to perspiration. Tongue thickly coated and decidedly brown; teeth and gums covered with sordes; pulse quite frequent, averaging 123 per minute. Urine scanty and high colored; abdomen tender and painful. Auscultation and percussion revealed no abnormal condition of the lungs. Liver and spleen were thought to be enlarged.

March 14th.—Prognosis more unfavorable; great general debility; complete loss of appetite; dusky hue of countenance and dulness of expression more striking; bowels costive; much restlessness and great nervous disorder.

March 15th.—No amelioration of symptoms. Headache succeeded by delirium and occasional stupor. Articulation difficult or indistinct. Pupils much contracted with drooping of upper eyelids. Subsultus tendinum and twitching of the muscles of face, also heat of skin, hot and pungent, resembling “ealor mordax,” were observed.

March 16th.—Tongue darker brown and more fissured. Spots on the skin of a dusky crimson color unaffected by pressure; tremulous movement of tongue and hands; pulse frequent and fluttering; extremities cold and clammy.

March 17th.—Symptoms more aggravated. Profound coma supervened, which soon terminated in death.

General plan of treatment consisted in the exercise of vigilance by attendants, and the adoption of remedies best calculated to allay excitement, to subdue local inflammation and to support his failing powers of life.

Case reported by

J. T. PINDELL,

Medical Cadet, U. S. A.

POST MORTEM,

Nineteen hours after death.

BRAIN.—Large quantity of serum was found under arachnoid and in its sac. About cerebellum and spinal marrow

the liquid seemed to exist in greater quantity. Arachnoid somewhat reddened, especially on superior and posterior of cerebrum. Serum in lateral ventricles, in third ventricle, and it probably existed in fourth. Substance of brain moderately firm, presenting fine congestion (capillary.) The floor of the fourth ventricle was discolored, and presented some arborescent congestion. Brain weighed 3 lbs. 3 oz.; measured 7 in.

HEART.—Normal, loaded with fat externally; substance pinked; blood fluid or coagulated imperfectly. Heart weighed 11 oz.; measured 5 inches.

LUNGS.—Lower lobe of left was congested even to blackness; had oedematous feel but was crepitant. The upper lobe was also black, but mixed with a more healthy pulmonary tissue.

RIGHT LUNG.—In this substance was congested; black posteriorly; somewhat lighter anteriorly and not so much congested. The inferior portion of lowermost lobe in a pneumonic condition; gray color; readily broken down, and yielding when broken down a puruloid fluid. Left lung weighed 1 lb. 5 oz.; measured 9½ inches. Right weighed 2 lbs.; measured 10 in.

LIVER.—Of light color; substance soft; well filled with blood. Presented superficially, inferiorly, anteriorly black congestion. Liver weighed 4 lbs. 4 oz.; measured 12 inches.

SPLEEN.—Slightly enlarged; flaccid; light red on dorsum; was mottled on internal surface.

Gall bladder filled with very black bile, partly concreted. Weighed 2 oz. 2 dr.; measured 4 inches.

KIDNEYS.—Left apparently normal. Right apparently normal. Tubular portions of pyramids well marked. Both of large size. Left kidney weighed 8 oz.; measured 5 inches. Right weighed 7 oz.; measured 5 inches.

PANCREAS.—Reddened. Weighed 4 oz.; measured 9 inches.

INTESTINES.—Peyers patches marked and dark colored. Organs generally darker and congested.

[CASE NO. 37.]

HOSPITAL NUMBER, }
No. 420. }

James Williams, private, Co. H, 69th Pennsylvania Vols.; aged 24.

HISTORY.—(ANTE MORTEM.)

Admitted March 16th, 1865, from Annapolis, Md.

Williams was a feeble, emaciated, cadaveric looking boy, of sanguine temperament; was brought among paroled prisoners from City Point. He was in a state of almost mental imbecility; complained of diffuse abdominal tenderness, particularly along the track of the colon. His dejections were involuntary, and the patient was perfectly helpless. He became hourly more feeble; failed to respond to treatment, and died without apparent pain on the following day.

Case reported by

W. G. SMULL,

A. A. Surgeon, U. S. A.

—o—

POST MORTEM.

March 18th, 1865, 20 hours after death.

Emaciation very great; not much rigidity.

BRAIN.—Two ounces of limpid serum were found in the sac of the arachnoid. Pacchionian bodies well shown; membrane itself pale. Serum was found in both lateral ventricles, also in the third; none was seen in the fourth, probably it had escaped.

Substance of the cerebellum was readily broken up, more so than that of cerebrum. Middle commissure of the third ventricle very well developed. Brain weighed 38 oz.; measurement $6\frac{1}{2}$ inches.

LUNGS.—Pleuritic adhesions on both sides and interlobar. On inspection exteriorly both lungs appeared reddened; the feel, especially of the right side, was rough. This roughness was due to the presence of miliary tubercles, generally in the gray stage. In section tuberculous masses, apparently of firm gray tubercles exteriorly, were found to have broken down and to have formed in their centres numerous small vomicae one or two lines in diameter. Larger vomicae than these were ob-

served associated with a dense white fibrinous mass or wall in posterior portion of the left lung. Tubercles in this left lung were apparently not so far developed as in the right. Left weighed 1lb. 2 oz.; measured $8\frac{1}{2}$ inches. Right weighed 1 lb. 7 oz.; measured $8\frac{1}{2}$ inches.

HEART.—Small and flaccid, pale externally, having in both left and right ventricles long white fibrinous clots attached to valves and apices as usual, connected to auricular appendices and extending ear-marked opposite valves into the aortas. Weight 9 oz.; measurement 4 inches.

LIVER.—Of a dark color externally, generally of dark substance internally, mottled with darker portions. Under capsule superiorly and inferiorly, as well as in substance, tubercles were observed. Weight 2 lbs. 9 oz.; measurement $10\frac{1}{2}$ inches.

KIDNEYS.—In left same kind of tubercles as in liver were observed, sparse and small in this kidney. In the right tubercles were more advanced and larger than in the left, and this kidney was darker and more congested, especially inferiorly. Left weighed $4\frac{1}{2}$ oz.; measured $4\frac{3}{4}$ inches. Right weighed 5 oz. 2 dr.; measured 5 inches.

SPLEEN.—Small, black, containing numerous advanced tubercles. Substance firm. Weight 4 oz. 2 dr.; measurement $4\frac{1}{2}$ inches.

INTESTINES.—Numerous small round ulcers in sigmoid flexure and rectum. In ascending colon, near cæcum, a large red ulcer was found. Throughout the whole of the ileum tubercles were observed under mucous membrane, in many cases associated with ulceration. These numerous miliary tubercles were less frequent in jejunum. Stomach small, contracted and somewhat congested. Mesenteric glands large, and tuberculous apparently. Weight of intestines $3\frac{1}{2}$ lbs.

[CASE No. 38.]

HOSPITAL NUMBER, }
319.

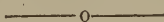
Joseph Lynch, age 44; private, Co. D, 99th New York Vols. Admitted March 11th, 1865, and died March 18th, 1865.

HISTORY.—(ANTE MORTEM.)

Lynch was admitted in a state of insensibility, pallid, and presenting a surface of body somewhat cold. Reaction was attempted to be brought on with only imperfect success. Two days after admission a low muttering delirium set in, which was followed by jactation and finally subsided into a profound coma which continued till death.

Case reported by

W. G. SMULL,
A. A. Surg., U. S. A.



POST MORTEM.

Eleven hours after death.

Some emaciation; not much post mortem rigidity.

BRAIN.—Serum in small quantity in both lateral ventricles. The floor of the fourth reddened and veined. There was capillary congestion of the cerebrum. In the anterior portion of the left cerebrum a remarkable osseous deposit, a small plate three quarters of an inch, or thereabouts, in diameter, and of crescentic section, channeled for vessels of pia mater, (and of course under the visceral arachnoid,) was observed. A true aneurism was observed in the basilar artery about the size of a pea. Substance of cerebellum softer than that of cerebrum. Brain weighed 52 oz.; measured 8 inches.

LUNGS.—Old pleuritic adhesions on the right side. Lung substance black posteriorly; dark red anteriorly. The lowest lobe of this lung, except a small portion anteriorly, was solidified so as to sink in water. Portions of the same lobe yielded no crepitation nor pulp, but broke granularly. This lung was very full of blood. Left lung was intensely congested; somewhat lighter colored in its anterior portion. An apoplectic spot

was observed under the pleura in the anterior portion of the lower lobe. Right weighed 2 lbs. 6 oz.; measured $10\frac{1}{2}$ inches. Left weighed 1 lb. $15\frac{1}{2}$ oz.; measured 11 inches.

HEART.—Imperforate auricular septum, although septal pouches were observed on both sides. White fibrinous clots, small and firm, were found in both ventricles. Heart loaded with fat externally and reddened. Weighed $10\frac{1}{2}$ oz.; measured 4 inches. Blood is fluid and does not coagulate.

LIVER.—Dark red externally, lighter colored internally but full of blood. Organ friable, of a strong hepatic odor, yielding by the gall-bladder gelatinous, yellowish bile in small quantity, and presenting superficially black congestion. Weighed 57 oz.; measured 11 inches.

SPLEEN.—Somewhat enlarged; soft in substance. Weighed $7\frac{1}{2}$ oz.; measured $5\frac{1}{2}$ inches.

KIDNEYS.—Some congestion about the tubules and their roots. Organs of natural appearance generally. Right weighed 4 oz. 2 dr.; measured $4\frac{1}{2}$ inches. Left weighed $4\frac{1}{2}$ oz.; measured $4\frac{1}{2}$ inches.

PANCREAS.—Discolored externally and red internally. Weighed $2\frac{1}{2}$ oz.; measured $7\frac{1}{2}$ inches.

INTESTINES.—Regional discoloration and general congestion of the large intestines. Ileum discolored with bile. Peyer's patches developed and somewhat raised. Regional congestion. Mucous membrane somewhat thinned. Arborescent spots were observed in ileum and lower part of jejunum. In fundus of stomach under the mucous membrane there was ecchymosis irregularly margined over a region of about 4 inches in diameter. Specimens of osseous deposit and aneurism preserved.

[CASE NO. 39.]

HOSPITAL NUMBER, }
No. 369. }

Frederick Bossardo, age 20; corporal, Co. I, 24th Michigan Vols. Was admitted from Annapolis, March 11th, and died March 17th, 1865.

HISTORY.—(ANTE MORTEM.)

Patient was of bilious temperament; in stature about 5 feet 10 inches; well proportioned and of fair muscular development. Was admitted into Hospital in a state of partial coma with tremor. Could be occasionally aroused to take nourishment and stimulants. Patient had at times violent spasms of the extensors and opisthotonos. Evacuations involuntary. Deep pressure in the right iliac fossa caused the patient to manifest symptoms of pain.

TREATMENT.—Sponging with warm alcohol; active counter-irritation to the nape of the neck; stimulants were given and concentrated nourishment. The patient after being aroused would quickly relapse into a state of stupor. Stupor and spasms continued until death.

Case reported by

W. G. SMULL,

A. A. Surgeon, U. S. A.

POST MORTEM,

Thirteen hours after death. Great emaciation; but little rigidity of muscles.

BRAIN.—Pachionian bodies well developed; substance of brain firm; capillary congestion; limpid serum in large quantities in the sac of the arachnoid. Serum in small quantity in each lateral ventricle; lining membrane opacified. Floor of fourth ventricle white; arborescently congested, however, above the origins of the auditory nerves. Substance of cerebellum softer than that of cerebrum. Weighed 52 oz.; measured 7 in.

LUNGS.—Right was very full of blood, and under visceral pleura two spots of ecchymosis on posterior portion of lowest lobe were observed. Old pleuritic adhesions on the left side

lower lobe. Partial indefinite solidification posteriorly, with appearance of ecchymosis, the substance affected by which had a specific gravity about the same as that of water. Right weighed 28 oz.; measured 11 inches. Left weighed 26 oz.; measured 10 inches.

HEART.—Small; white fibrin clots in both ventricles, somewhat mixed in the right; no clots in the auricles; organ apparently normal; less reddened than that of previous case, (No. 38.) Weighed 10 oz. 1 dr.; measured 4 inches.

LIVER.—Substance of a light color; friable, odorous and yielding a brown gelatinous looking bile. Weighed 3 lbs. 13 oz.; measured $11\frac{1}{2}$ inches.

SPLEEN.—Enlarged; full of blood; easily broken down; flaccid; of a dark brown color. Weighed 12 oz. 1 dr.; measured $6\frac{1}{2}$ inches.

KIDNEYS.—Congested and generally reddened in substance. Right weighed 4 oz.; measured $4\frac{1}{2}$ inches. Left weighed 5 oz.; measured $4\frac{1}{2}$ inches.

SUPRA-RENAL CAPSULES.—Of natural size and apparently normal.

PANCREAS.—Reddened. Weighed 3 oz.; measured 10 in.

INTESTINES.—Colic glands enlarged and blackened; general discoloration of large intestines. Peyer's patches very conspicuous through whole of ileum. Gut of a yellowish color internally; mucous membrane thinned; spots of ecchymosis in jejunum; jejunum generally yellowed; stomach enlarged and mottled internally.

[CASE No. 40.]

HOSPITAL NUMBER, }
 —. }

Body admitted March 19th, 1865, for burial. Supposed to be that of James Warren, who was reported in the morning papers of the 19th as having been shot the evening previous while attempting to desert. This man was a substitute.

POST MORTEM.

About thirty-six hours after death.

Body not emaciated. No post mortem rigidity.

West's Bureau Records, Vol. 14, Page 137
 BRAIN.—Pia mater reddened and finely congested. Corpus callosum, fornix and the walls of the lateral ventricles softened. Floor of the fourth ventricle discolored and softened, having spots of congestion on both sides superiorly. Cerebellum and cerebrum apparently softened. Weighed $48\frac{1}{2}$ oz.; measured 8 inches.

LUNGS.—In the right, posteriorly, numerous spots of ecchymosis were observed; whole lung tinted red and very full of blood. Left collapsed. In the upper lobe there was a perforation from below upwards, associated with effusion of blood, and in left pleural sac was a great quantity of effused blood. Right weighed 18 oz.; measured 9 inches. Left weighed 9 oz.; measured $7\frac{1}{2}$ inches.

HEART.—Large, firm; contained no clot. Weighed 11 oz.; measured $4\frac{1}{2}$ inches.

LIVER.—Much black discoloration of anterior inferior portion of the left extremity of the liver. Organ presented steel-colored cut surface. Weighed 51 oz.; measured 11 inches.

SPLEEN.—Torn on anterior, inferior, interior surface and blackened about the lower extremity. Weighed 6 oz.; measured 4 inches.

KIDNEYS.—Flaccid and discolored. Right weighed 4 oz. 2 dr.; measured 5 inches. Left weighed 5 oz.; measured 5 in.

PANCREAS.—Flaccid and blackened. Weighed 3 oz.; measured 8 inches.

INTESTINES.—Greatly discolored, and so offensive that they were not opened.

THE WOUND.—Ball entered about four inches back of ante-

rior superior spinous process of left ileum, passed upwards, forwards and inwards, passing through the spleen and left lung and lodging in the neck.

[CASE NO. 41.]

HOSPITAL NUMBER, }
305.

Culbert Whitcomb, Government Employee, aged 23. Sanguine temperament. Died March 18th, 1865.

HISTORY.—(ANTE MORTEM.)

Patient was admitted into Hospital March 8th, 1865, presenting symptoms of well marked Typhoid Pneumonia; dulness on both sides of the chest anteriorly and posteriorly, with fine crepitation over the upper lobe of each lung anteriorly; also, friction sounds over the lower lobe of the left lung anteriorly. Cups were applied freely over the surface of the chest, followed by blisters.

March 14th.—Clear sound over all parts of chest and breathing free; little or no cough; expectoration natural.

March 16th.—Delirium, diarrhoea; tongue dry and cracked. Emuls. Terebinth given.

March 18th.—Death.

Case reported by

J. G. KELLER,

A. A. Surgeon, U. S. A.

POST MORTEM,

March 20th, 1865. Thirty-six hours after death.

Not much emaciation; no rigor mortis.

BRAIN.—Veins of pia mater on the summits of the cerebra engorged, and so full at the junction of the posterior with the fourth *fifth* of the upper border as to present, superficially, the appearance of a clot. Cerebral capillaries engorged. Limpid serum found in the lateral ventricles in considerable quantity, and somewhat bloody in the posterior horn of the left lateral

ventricle; no commissura mollis in third ventricle; discoloration of the floor of the fourth ventricle at the upper and lower extremities. A white zone, in which there were four marked lines of congestion, was observed crossing the middle of the floor just above the auditory nerve; the greater congestion appeared on the right side. Substance of cerebellum was apparently softer than that of cerebrum. Weighed 3 lbs. 4 oz.; measured 7 inches.

LUNGS.—The posterior portion of the right lung was much congested, crepitant, presenting, it was thought, evidence of ecchymosis in substance and under the visceral pleura.

The left lung was also crepitant, except posteriorly, where it was partially carnified and much congested generally. There were old pleuritic adhesions on the posterior portion of the inferior lobe of this lung, and in extraction the lobe was partially torn. Left weighed 1 lb. 4 oz.; measured 9 inches. Right weighed 1 lb. 7 oz.; measured 10 inches.

HEART.—Blood fluid; white clot inelastic, and readily torn and separated in the right ventricle; similar clot in the right auricle. Heart flaccid and of dark red color, looking as if had been bruised generally, and having the white membrane of its structure intensely and darkly reddened. The lining membrane of the aorta was of a dark scarlet hue. Weighed $13\frac{1}{2}$ oz.; measured 4 inches.

LIVER.—Dark externally, especially over the upper part of the right lobe; superficial black congestion anteriorly and inferiorly; tissue readily broken down; hepatic odor developed; light colored mottlings observed on the left superior surface; the light substance extending a line or more and ending indefinitely; bile very black. Weighed 3 lbs. $6\frac{1}{2}$ oz.; measured 11 inches.

SPLEEN.—Small; generally dark colored; very tough in substance. Weighed $3\frac{1}{2}$ oz.; measured 4 inches.

KIDNEYS.—Flaccid, tinted red; tubules and cortical portions not marked with great distinctness; sac of right supra-renal capsule distended and filled with a granular bloody fluid. Left weighed $4\frac{1}{2}$ oz.; measured $4\frac{1}{2}$ inches. Right weighed $3\frac{1}{2}$ oz.; measured 4 inches.

PANCREAS.—Reddened. Weighed $2\frac{1}{2}$ oz.; measured 8 in.

INTESTINES.—A large spot of ecchymosis under the mucous

membrane of the fundus of the stomach. Congestion in duodenum and upper part of jejunum quite intense; lower part of jejunum tinted dark red. Ileum intensely congested. Peyer's patches well developed; solitary glands enlarged; congestion was associated with a deep red tint. A few ulcers in the mucous membrane of the large intestines, either round or irregularly oval. Internal surface of the large intestines was intensely congested.

No albumen was found in the urine.

[CASE No. 42.]

HOSPITAL NUMBER, }
448.

Samuel Leonnon, aged 23; private, Co. G, 21st Illinois Vols. Was admitted March 16th, 1865, from Annapolis, Md.

HISTORY.—(ANTE MORTEM.)

Leonnon, an Anglo-Saxon, of sanguine temperament, about 5 feet 9 inches in stature, was admitted into my wards March 18th, 1865, in a debilitated condition.

SYMPTOMS ON ADMISSION.—Percussion over the chest, anteriorly, was normal, but posteriorly there was marked dullness over the lower third of the left lung, where no sound was audible. There was no expectoration. Respiration was very hurried. Pulse was weak and quick. Tongue brown and dry. Bowels very loose. Emulsion of turpentine was ordered for him, and plenty of brandy and beef tea.

March 19th.—Patient no better; his countenance livid and anxious.

5, P. M.—Diarrhœa somewhat checked but pulse still very weak and quick, and respiration more hurried.

Ammon. Carb. and Sulph. Æther were added to the emulsion of turpentine, and the beef tea and brandy given regularly as previously. Patient continued to grow worse, and at 8 o'clock, P. M., March 19th, died.

Case reported by

C. W. NEFF,

A. A. Surgeon, U. S. A.

POST MORTEM.

Fifteen hours after death.

BRAIN.—Limpid serum observed in the sac of the arachnoid.

The pia mater and visceral arachnoid were not easily detached from the convolutions. It was thought that the visceral arachnoid was opacified. The white substance of the brain presented numerous puncta, and a cut surface became red, soon, on exposure to the air. No soft commissure. On the floor of the fourth ventricle congested vessels on both sides above the auditory nerves were observed. Floor of the fourth ventricle otherwise normal in appearance. Weighed 3 lbs. 3 oz.; measured 7 inches.

LUNGS.—In the pleural sacs there was effusion of a sero-puruloid fluid. Right lung generally reddened; presented solidification (pneumonic) in the back portion of the uppermost lobe, and two nodules of similarly solidified tissue on the exterior and interior borders. A section of the posterior solidification revealed a collection of solidified lobules, the outlines of all of which were clear, and this collection was surrounded by an infiltration of serum. The lobules resisted breaking up under the finger, and the outlines of their hard white masses were easily appreciable from the exterior.

In the lowest lobe of the right lung, posteriorly, there was another nodule of solidification as big as a hen's egg, the substance of which was black, tough and not broken down readily. This substance was of less specific gravity than water. The pleura over it was thickened.

In the uppermost portion of the posterior lobe of the left lung there was a large mass of solidified substance with clear lobules. Section through the hardened and whitened lobules here presented a surface of a light red color, faintly mottled, distinctly granular and elastic. In the middle of this tissue was an abscess with caseous puruloid fluid. Nodules containing pus were observed in the upper lobe of the left lung and posterior border of the lower lobe. Centres of these nodulations in the upper lobe were filled with puruloid fluid. When a small mass of the solidified portion was pressed, a thread of

white fibrinous plastic tissue was driven out. Right weighed 24 oz.; measured 9 inches. Left weighed 25 oz.; measured 10 inches.

HEART.—Mixed clot in the right auricle and ventricle; black clot in the left auricle and ventricle. Perforate septum. Heart weighed 9 oz.; measured $3\frac{3}{4}$ inches.

LIVER.—Of somewhat dull color; easily broken up, and apparently of great specific gravity. Capsule could be torn off, but in the tearing there was resistance. Weighed 4 lbs. 12 oz. 6 dr.; measured 12 inches.

SPLEEN.—Enlarged, dark colored and flaccid, presenting numerous firm, white fibrinoid masses of various sizes and locations, chiefly observed, however, in the upper portion of the organ. Weighed 14 oz.; measured 8 inches.

KIDNEYS.—Right congested black inferiorly; arborescently under the capsule; presented two white fibrinoid masses, allied in every respect to the morbid masses observed in the spleen. Left kidney similar in appearance to the right, presenting no fibrinoid masses; arborescent congestion under the capsule. Right weighed $7\frac{3}{4}$ oz.; measured 5 inches. Left weighed 6 oz. 5 dr.; measured 5 in.

SUPRA-RENAL CAPSULES.—Reddened, apparently normal.

GALL BLADDER.—Contained very light colored bile. Weighed 1 oz. 1 dr.; measured 4 inches.

PANCREAS.—Normal. Weighed 3 oz. 1 dr.; measured 8 in.

INTESTINES.—Large, somewhat reddened in regions; intense congestion of the ileum with thinning and softening of the mucous membrane. Stomach large. Intestines weighed 4 lbs.

[CASE NO. 43.]

HOSPITAL NUMBER, }
343. }

Aaron James Brown, aged 32; private, Co. I, 52nd Ohio Vols.; admitted March 11th, 1865, and died March 21st, 1865.

HISTORY.—(ANTE MORTEM.)

Brown was about 5 feet 9 inches high; of fair muscular development; black hair and eyes; dark, sallow complexion; bilious temperament. Was admitted with delirium, which became more decided on the first night of admission. The surface of the body was of the ordinary temperature and very dry. The skin was covered with an eruption of a dark, mulberry color, irregularly circular, each spot about the size of a split pea, and not elevated. These spots did not disappear entirely upon pressure. Tongue was stiff and coated with a dark incrustation. Sordes upon the teeth. Pupils slowly responsive to light. Body exhaled an ammoniacal odor. After the usual process of renovation the patient became more composed and slept at intervals during the night. On the following morning there was no improvement; patient became more delirious, being unaware when food was offered him. He lay with his head strongly drawn backward. Conjunctiva deeply congested and pupils almost insensible to light. These symptoms, with increased tremor, increased till death.

Case reported by

W. G. SMULL,

A. A. Surgeon, U. S. A.

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POST MORTEM.

March 22nd, 1865. Twenty-four hours after death.

Not much emaciation. Great rigor mortis.

BRAIN.—No serum in the sac of the arachnoid; veins of the pia mater full; numerous puncta on the cut surface of brain substance; substance somewhat reddened upon section; bloody serum was found in the posterior horn of the left lateral ventricle; very little in the anterior horns. The floor of the fourth

ventricle was opacified, and the origin fibres of the auditory nerves indistinct. The substance of the medulla oblongata was somewhat congested. The pia mater was detached with difficulty from the convolutions. Weighed 2 lbs. 13 oz. 2 dr.; measured 7 inches.

LUNGS.—Pleuritic adhesions on the right side posteriorly; none on the left; no effusion of serum. The lowermost lobe of the right lung presented several apoplectic spots beneath the pleura near the upper extremity posteriorly. Some mottling was observed over the exterior face of the whole lung. All the substance was crepitant. Tough feel, posteriorly, in the regions of the old pleuritic adhesions. The organ was not thought to be congested, although quite full of blood. In the left lung in the posterior part of the lower lobe, on superficial examination, outlines of lobules well defined to sight and feel were observed. The substance of and about these lobules presented upon section a conspicuous mottling of comparatively light red polyhedral spots, in a back ground, so to speak, of effused blood. The latter (the effused blood) could be scraped off, and appeared to be associated with vessels of the interlobular structure. A portion of the tissue in which these phenomena were presented sank readily in water, and, when broken up under the finger, yielded a bloody pulp.* Lung was generally full of blood in other portions, but in no place congested (except that described) so as to have the function of the organ interfered with. Left weighed 1 lb. 4 oz.; measured 9 inches. Right weighed 1 lb. 5 oz.; measured 9 inches.

HEART.—Auricular septum imperforate; no clots. Organ normal. Weighed 9 oz.; measured 5 inches.

LIVER.—On the superior portion of the right lobe a large oval discoloration was observed; also, spotted discoloration on the left lobe, superiorly, near the centre. Irregular light colored spots, mottlings, were observed superiorly, generally to the left, in the organ. A section through these light colored spots exhibited the fact of their extension into the hepatic substance. Substance of the organ seemed finely congested, especially in the regions indicated by spots of congestion observed superiorly. Weighed 3 lbs. 8 oz.; measured 11 inches.

*—The sections of lobules exhibited, on a close inspection, a fine granular appearance.—*Note made six months after the autopsy.*

SPLEEN.—Of natural size; somewhat blackened on dorsum. Substance of a dark red color, presenting no striking abnormality. Weighed 5 oz.; measured 5 inches.

KIDNEYS.—Left somewhat irregularly developed; was a little congested; otherwise normal. Right also irregularly developed and a little congested; both faintly lobuled. Left weighed 5 oz. 4 dr.; measured $4\frac{3}{4}$ inches. Right weighed $4\frac{1}{2}$ oz.; measured 4 inches.

SUPRA-RENAL CAPSULES.—Reddened in the sac and torn on extraction.

PANCREAS.—Enlarged; of light color and somewhat friable. Weighed 3 oz. 2 dr.; measured $7\frac{1}{2}$ inches.

INTESTINES.—Large intestines normal; lower part of these organically congested. No disease of Peyer's patches observed. Congestion seemed to have a tendency to determine itself in spots variable in diameter and irregular in form; not generally more than one-fourth of an inch in diameter. Upper part of jejunum reddened. Ecchymosis observed under the mucous membrane in the stomach; black, dark, bloody spots. Weighed ^{4 1/4 inch} 8 ounces.

GALL BLADDER.—Large quantity of very black bile. Weighed $1\frac{3}{4}$ oz.; measured $7\frac{1}{2}$ inches.

Numerous dark colored spots, apparently faded, were observed on the cadaver. Section through revealed nothing. Body presented a measled appearance. Albumen was found in large quantity in the urine. The blood was generally fluid.

[CASE NO. 44.]

HOSPITAL NUMBER, }
543.

Henry Brockmeyer, private, Co. E, 1st Maryland Vols.; aged 44 years.

HISTORY.—(ANTE MORTEM.)

Brockmeyer, a stout muscular German, was admitted into this Hospital March 22nd, 1865, about noon. He walked with some assistance to the foot of the stairs leading to the ward. When seen by the ward Surgeon he was sitting up in bed suffering greatly with dyspnœa. His countenance was anxious and of a slightly venous hue. Intellect unaffected. He expressed a desire to be bled, stating that he thought it would relieve him. His pulse was frequent and rather feeble. On inspection the left side of the chest was found to remain fixed during respiration; the right side responded as usual to the respiratory efforts. Percussion revealed dullness amounting to flatness over the whole surface of the left lung, both anteriorly and posteriorly. No respiratory murmur, rales or bronchial breathing, in fact, little or nothing, was heard over this lung on auscultation. Over the right resonance and respiratory sounds were normal. The feeble condition of the patient, and the shallowness of the respiration, prevented a thorough and satisfactory examination of the lungs.

The only previous history of the case obtained was that the man had been sick about three weeks.

Dry cups were freely applied to the affected lung, in front and behind, and three grains of Dover's powder, with two of sulph. quiniæ, ordered every third hour, also one ounce of whisky every third hour. At 12 o'clock at night he was lying down breathing with still greater difficulty, and evidently more feeble and prostrated. He had expectorated a considerable quantity of dark and very offensive puruloid matter. During the latter part of the night the patient became flighty and delirious. About 6 o'clock, A. M., he got out of bed and walked across the room to get, as he said, some water. He was led back and laid upon the bed; his head had scarcely touched the pillow when he died.

Case reported by

G. H. DARE,

A. A. Surg., U. S. A.,

POST MORTEM,

Nine hours after death.

No emaciation. Slight rigor mortis.

BRAIN.—Glandulæ flaccidioni very numerous; veins of pia mater engorged, and membrane generally finely congested. It was readily separated from the convolutions of the cerebrum; substance of the cerebrum apparently somewhat softened; lining membrane of the lateral ventricles opacified and appeared a little softened, presenting numerous arborescences, at the terminal branches of which, in posterior horn of right lateral ventricle, there were blood spots a quarter of a line in diameter. These blood spots were ecchymoses, in all probability, and were beneath the lining membrane. Serum in small quantity in both lateral ventricles and in the third ventricle. Substance of the fornix apparently somewhat softened; the floor of the fourth ventricle discolored, having a reddish, somewhat dark hue, and marked by numerous arborescences on both sides, more especially on the right; one very big vein was seen near the mouth of the right cerebellar ventricle; lining membrane of this ventricle was thickened. When section was made superiorly in the Pons Varolii through the marked spots of congestion of both sides on the floor of the fourth ventricle, the lining membrane of the latter was clearly seen thickened and opacified and marked in the congested regions referred to by a dark line or region of appreciable breadth that existed between it and the substance beneath. There was decided congestion of the Pons. Striated bodies congested. Substance of cerebellum softer than that of cerebrum. Weighed 60 oz.; measured 8 in.

HEART.—Mixed clot, chiefly white, in the right auricle, of large size, communicating with a mixed clot in the right ventricle which bound together the cusps of the valve and the apex of the ventricle with its triangular mass, and extended an arm marked opposite the valves into the pulmonary artery. The dark part of this clot was in the lower and posterior portion of the ventricle. In the left auricle was a black clot which communicated with a clot attached to the anterior cusp and the left external wall of the left ventricle. From the latter a mixed clot was given off which extended into the aorta and was car-

marked opposite the valves. Weighed 12 oz.; measured $4\frac{1}{2}$ inches.

LUNGS.—About two ounces of serum found in the left pleural sac. Adhesions on both sides, chiefly on the right. A number of pleuritic adhesions of recent formation and of tough, thick, white elastic material in layers was observed to cover the external and inferior surfaces of the visceral pleura of the left lung. Vessels were observed forming in the thick inferior layers of this matter. The whole of the lower lobe of this lung was consolidated, and on section exhibited gray hepatization, readily breaking up into a puruloid pulp, and its substance exhibited a fine gray granular appearance on section. Very heavy. The lobes of this lung were bound together by very thick recent pleuritic effusion of plastic lymph, and the surface of the upper lobe was covered with a similar pleuritic formation of the effusion. One consolidated lobule was found in it. The lobe had a dark colored appearance. A small hard mass was found on the inner portion of the upper lobe of the right lung. The whole organ reddened and very full of blood. The surfaces of the bronchial tubes of both lungs were reddened. Left weighed 4 lb. 6 oz.; measured 9 inches. Right weighed 1 lb. 13 oz.; measured $10\frac{1}{2}$ inches.

LIVER.—Full of blood; presented a somewhat dark appearance externally, mottled with light colored spots, which were also observed in the substance. Organ friable, yielding a granular appearance when torn. Hepatic odor faint. Weighed 4 lbs. 10 oz.; measured 12 inches.

SPLEEN.—Of natural size; flaccid; blackened inferiorly; substance softened. Weighed 8 oz.; measured $4\frac{1}{2}$ inches.

KIDNEYS.—Right somewhat congested; the left also congested; the substance of left firm. Left weighed $7\frac{1}{2}$ oz.; measured $4\frac{1}{2}$ inches. Right weighed 6 oz.; measured 4 inches.

PANCREAS.—Normal. Weighed 4 oz.; measured 9 inches.

SUPRA-RENAL CAPSULES.—Normal. The cortical substance of lighter color than usual.

INTESTINES.—Lower part of ileum generally congested dark red. Peyer's patches marked; not inflamed. In the upper part of jejunum was one spot of intense congestion. Stomach normal. Weighed 4 lbs. 4 oz.

Albumen found in the urine. Specimens of Gall stones were preserved.

[CASE No. 45.]

HOSPITAL NUMBER, }
347. }

John Atwater, aged 22 years; private, Co. I, 44th Ohio Vols. Was admitted March 11th, 1865, from Annapolis. Died March 22nd, 1865.

HISTORY.—(ANTE MORTEM.)

Atwater was of German descent, about 5 feet 7 inches in stature; of nervous, sanguine temperament; had light hair and eyes; meagre, muscular development. Was admitted into the Hospital in a state of extreme feebleness, the result of exhaustion from chronic diarrhœa. According to his statement he was taken with it some two months previous, while a prisoner in a southern prison. It has been persistent ever since. He received but little treatment before admission into this Hospital. Examination showed an entire want of the power of assimilation. The small quantity of ingesta he received passed from him unchanged, mixed with a large quantity of sero-mucous fluid. There was diffused tenderness over the entire abdominal region. Tongue red and glazed. Checks at times hectic. Astringents, both mineral and vegetable, failed to produce any effect. They were combined with tonics and stimulants. The evacuations became more serous and more frequent; finally, involuntary, when he died.

Case reported by

W. G. SMULL,

A. A. Surgeon, U. S. A.

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POST MORTEM.

Forty-eight hours after death.

Great emaciation. Some slight rigidity of the muscles.

BRAIN.—Moderate ingestion of the pia mater. Cerebral puncta more numerous on the left than on the right side. A vessel was observed in the floor of the fourth ventricle, right side, superiorly, above the origin of the auditory nerves. Some fine congestion of the Pons Varolii. Weighed 45 oz.; measured 7 inches.

HEART.—Auricular septum imperforate; the organ small and flaccid. A flaccid clot of fibrinous tissue in auricle was observed adhering to the anterior cusp of the tricuspid valve and extending into the pulmonary artery ear-marked opposite valves. Small white clot in the left ventricle adhering to the anterior cusp. White clot in left ventricle. Heart weighed 8 oz. 2 dr.; measured $4\frac{1}{2}$ inches.

LUNGS.—Specific gravity of the substance in excess. General appearance of the right superficially dark, mottled pink dark red and black. A lobulated feel throughout the lowest lobe and in the back portion of the uppermost lobe. When the substance of the consolidated portions was examined, it was found that the lobulated feel, externally, was due to what was probably a lobular pneumonic disease. In the posterior portion of the uppermost lobe only a small part of that termed consolidated tissue was not crepitant. Section presented a dark color and on pressure a frothy, black, offensive fluid was exuded. The left lung, posteriorly, was of a dark color; anteriorly, of light color. The upper lobe was apparently normal. The posterior portion of the inferior lobe presented light colored lobules and a dark smooth surface. Deep blood-red spots of apoplectic effusion or ecchymosis were observed underneath the pleura. No well formed clots were found, although amid the intense congestion effusion of blood under this organ was undoubted. In a region of smooth black mottling, congestion (and ecchymosis) was so intense as to conceal the ordinary structure of pulmonary tissue. Right weighed 25 oz.; measured $9\frac{1}{2}$ inches. Left weighed 17 oz.; measured 9 inches.

LIVER.—Of light color, presenting a marked nutmeg appearance superficially and on section. Substance friable. Outlines of the acini ill defined, although perceptible. Tissue of the organ rather soft. Anteriorly, inferiorly, to the left a superficial black discoloration was observed. Weighed 3 lbs.; measured 11 inches.

SPLEEN.—Discolored; dark red posteriorly: dark red and black on the internal surface. Substance flaccid; smooth and shining cut surface. Not softened. Substance generally of a dark, cherry red color. Weighed 7 oz.; measured 6 inches.

KIDNEYS.—Both of a somewhat light color. Darkly congested inferiorly. Right weighed 5 oz. 2 dr.; measured $4\frac{1}{2}$ inches, Left weighed 4 oz. 4 dr; measured $4\frac{1}{2}$ inches,

PANCREAS.—Small, flaccid and discolored. Weighed 4 oz.; measured $8\frac{1}{2}$ inches.

GALL BLADDER.—Filled with thick, granular, nearly black bile. Weighed 2 oz.; measured $3\frac{1}{2}$ inches.

INTESTINES.—The mucous membrane of the rectum, sigmoid flexure of the colon and a small portion of the transverse colon was of a reddish brown color superficially, and at a little distance presented an appearance of rough granulation. On close inspection isolated points of mucous membrane were observed standing in the midst of a surface, the result of a diseased action, by which the surrounding (mucous) membrane was destroyed. Most of the smaller granules were developed by the progressive increase of the diseased action from the border to the centre; and the islands, so to speak, were observed in all stages from that of a large one nearly healthy in centre, through that of less magnitude with centre blood red, to that of a small one with its surface reddish brown or ash colored. The term *honey-combed* might with propriety be applied to portions of intestinal surface thus affected. Muscular and fibrous coats found much thickened, longitudinally corded and contracted. The walls of the gut were two lines in thickness. In transverse colon the ulceration was somewhat irregular, largely developed as a rule in intercolumnar pouches. Colic glands observed with their black points in ascending colon and cæcum. Evidences of hyperæmia in cæcum. In the lower part of ileum the folds of mucous membrane were thick and very distinct. There appeared to be little or no wasting of the membrane in the tips of the folds. In one place these were covered with fine ash colored granules. The folds appeared thickened in this region. Peyer's patches not apparently diseased. Above the region of hyperæmia the intestines had a greenish hue. Mucous membrane began to be thinned; was apparently discolored by bile. The green hue lasted through ileum and was succeeded by a slate color in the lower part of the jejunum, this again yielding to a greenish color. Evidences of hyperæmia in the stomach. Mesenteric glands slightly enlarged. Intestines weighed 3 lbs. 7 ounces.

[CASE NO. 46.]

HOSPITAL NUMBER, }
323:

John McEuhurt, aged 28; corporal, Co. D, 7th New York Vols. Was admitted March 11th, 1865, from Annapolis, Md. Died March 24, 1865.

HISTORY.—(ANTE MORTEM.)

Patient was of sanguine temperament; pale and emaciated with chronic diarrhœa contracted while a prisoner in the South. Bowels moved from ten to twelve times per day, the discharges being of a dark color, very fluid and offensive; tongue white in the centre and red towards the edges; appetite good; slight pain over the abdomen and tenderness on pressure; pulse small and feeble. Opium was given in two grain doses with acetate of lead with no resultant diminution of diarrhœa. Various vegetable astringents and tonics were employed without avail. Patient sank from exhaustion March 24th, 1865.

Case reported by

J. G. KELLER,

A. A. Surgeon, U. S. A.

POST MORTEM,

Fourteen hours after death.

Great emaciation. Slight post-mortem rigidity.

BRAIN.—Arachnoid and pia mater pale. Although the pia mater was pale the vessels were normally full. Pacchionian bodies well developed. A considerable quantity of serum flowed from sac of arachnoid. Substance of cerebra was of a delicate pink color. Puncta very numerous. Limpid serum in both lateral ventricles; large quantity also in third ventricle. Considerable quantity of serum in the fourth ventricle also. Arborescence observed in the floor of this ventricle. The floor was generally though faintly tinted red. Weighed 49 inches; measured 7 inches.

LUNGS.—The right lung speckled with melanic matter universally; posterior portion cherry red, much darker in color than the anterior portion, of somewhat doughy feel. Old pleu-

ritie adhesions connected the lobes. Consolidated feel of the posterior portion of the uppermost lobe greater than in any other portion. Upon section through lowermost lobe two spots like bruises were observed in the midst of the pulmonary substance that resembled in all respects ecchymoses of other tissues. Cross sections revealed similar ecchymoses. When the substance was pressed a large quantity of frothy liquid was expressed from the cut surface. In the left lung old pleuritic adhesions interlobar connecting opposed surfaces. The upper lobe of the lung was generally speckled with melanic matter. In the lower lobe several spots of ecchymosis or effusion were observed over the posterior portion. Partial consolidation found on the posterior part of the base of this lung. Substance sinks in water; breaks up like and presents the appearance of pneumonified tissue in second stage. Blood was fluid and flowed freely from the large vessels when cut. Right weighed $20\frac{1}{2}$ oz.; measured $7\frac{1}{2}$ inches. Left weighed $15\frac{1}{2}$ oz.; measured 7 inches.

HEART.—Small. Auricular septum imperforate; deep pouches in both sides. Small, white, tough clot in the right ventricle; apex, eusp and base attached, having one arm extending from auricle and another into pulmonary artery. Right auricle clot, small, mixed and easily broken. In left ventricle anterior eusp was attached to a clot connecting both eusps, joined with an auricle clot and sending an arm into aorta ear-marked opposite semilunar valves. Weighed 5 oz. 6 dr.; measured $3\frac{1}{2}$ inches.

LIVER.—Small and bronzed, presenting white spots on superficial observation, which, as in other cases, were found to extend into the substance. On section the substance seemed to be faintly, not very finely mottled. On close observation found still of a brown or bronze color. Outlines of the acini not very distinct on torn surface. Black congestion superficially inferiorly anteriorly and to the left. Substance of the organ of quite firm consistence. Weighed 28 oz.; measured 4 inches.

SPLEEN.—Small, tough and blackly congested inferiorly. Substance itself firm; shining on cut surface, and of a mahogany or deep cherry red color. Weighed 3 oz. 4 dr.; measured 4 inches.

KIDNEYS.—Right firm and somewhat light colored. Left dark and congested posteriorly and inferiorly. Tubules distinctly marked. Right weighed 4 oz.; measured 4 inches. Left weighed 4 oz.; measured 4 inches.

GALL BLADDER.—Filled with gall of an amber color. Weighed 1 oz. 3 dr.; measured 3 inches.

PANCREAS.—Small and flaccid. Weighed 7 oz.; measured 7 inches.

SUPRA-RENAL CAPSULES.—Large and of a light color.

INTESTINES.—Color of the large intestines very dark slate. Mucous membrane perforated by a number of round or oval ulcers. Regional hyperæmia of ileum. Great wasting of the mucous membrane. Intestines present an ironed appearance. Hyperæmia in jejunum with dark colored regions. Stomach small and slightly congested along the mucous folds. Intestines weighed 4 lbs.

[CASE NO. 46.]

HOSPITAL NUMBER, }
224.

Abram J. Stokes, private, Co. C, 120th N. Y. Vols.; aged 23 years, Was admitted Feb'y. 21st, 1865, died March 24th, 1865.

HISTORY.—(ANTE MORTEM.)

Patient, about six feet in stature, of nervo-sanguine temperament, auburn hair, light eyes, was admitted to Hospital in an advanced stage of Phthisis Pulmonalis, considerably emaciated and much exhausted apparently from coughing. Physical signs very manifest. Cheeks suffused with hectic flush. Eyes large, prominent; conjunctiva injected. Patient coughs almost incessantly; complains but little of pain in his chest; has slight hoarseness; has more or less aversion to food, and after taking it frequently ejects it upon coughing. He seems to be suffering from a general state of constitutional irritation as the effect of the disease. Exploration of the chest by percussion gives a general sound of dullness, increasing in intensity in different parts. Auscultation develops all the sounds peculiar to diffused

tuberculosis. A loud ronchus is observed posteriorly beneath the scapula on the left side and sibilant rales are heard nearly universally over the remainder of the lungs. Broneophony can be detected at the base of the right lung posteriorly. Patient could endure no treatment, as it invariably had an unpleasant effect upon his digestive organs. Colliquative diarrhœa and sweating continued to reduce him until he died.

Case reported by

W. G. SMULL,

A. A. Surgeon, U. S. A.

— o —

POST MORTEM.

Thirty-six hours after death.

Not much emaciation. No rigor mortis.

BRAIN.—Pia mater somewhat ingested. Puncta numerous in the cerebra. A small quantity of limpid serum found in both lateral ventricles. Fornix somewhat softened. Arborescent congestion on the floor of the fourth ventricle on the right side. Substance of cerebellum softer than that of cerebrum. Little fluid was found in the sac of the arachnoid. Weighed 49 oz.; measured 7 inches.

LUNGS.—In the right lung superficially the pleura was granulated, banded and sheeted. Lobes united by pleuritic adhesions. A hard finely lobulated feel posteriorly. Crepitant over one-eighth the extent of the lung posteriorly. Anteriorly miliary tubercles in the upper part of the lung. In the upper part posteriorly there was a vomica. The whole organ found ingested.

The left lung was superficially sheeted with lymph. Lobes united by adhesions. A finely nodulated feel posteriorly; consolidated feel anteriorly, the consolidation in the upper lobe in excess. In this lobe there was an immense number of miliary tubercles at intervals, and the bruised spots were distinctly marked. Right weighed 40 oz.; measured 11 inches. Left weighed 33 oz.; measured $9\frac{1}{2}$ inches.

HEART.—Organ large and flabby. Large white clot in the right ventricle, attached and extended in the usual manner, connected with a clot in the right auricle; neither clot firm.

Large, loose, white clot easily broken up in the left ventricle, with a mass of black ill coagulated blood. Auricular septum imperforate. Weighed 15 oz. 2 dr.; measured 4 inches.

LIVER.—Of somewhat light red color, but lighter anteriorly than posteriorly. Whole organ veined along courses of vessels; friable, exhibiting acini somewhat indistinctly on the torn surface. On section the cut surface appeared smooth and shining and was slightly mottled. Weighed 63 oz.; measured 11 in.

SPLEEN.—Some minute bodies resembling tubercles on the dorsum. Organ very flabby. A region of black congestion inferiorly. Substance generally of a light color and rather tough. Weighed 6 oz. 2 dr.; measured $5\frac{1}{2}$ inches.

KIDNEYS.—Large; the left greatly exceeded the right in size; both were flaccid and light colored. Left weighed 7 oz. 2 dr.; measured $5\frac{1}{2}$ inches. Right weighed 5 oz. 2 dr.; measured $4\frac{1}{2}$ inches.

PANCREAS.—Normal; slightly enlarged. Weighed 3 oz. 5 dr.; measured $7\frac{1}{2}$ inches.

SUPRA-RENAL CAPSULES.—Somewhat dark in color but apparently normal.

GALL BLADDER.—Filled with black bile. Weighed 2 oz. 2 dr.; measured 4 inches.

INTESTINES.—Regional hyperæmia of the large intestines. Descending, transverse, and ascending colon in the vicinity of the cæcum slate colored. Regional hyperæmia in cæcum and below it. White bodies resembling tubercles observed in Peyer's patches. Ecchymosis in the fundus of the stomach. Weighed 4 lbs. 2 oz.

No albumen in the urine.

[CASE No. 47.]

HOSPITAL NUMBER, }
572.

Gustavus Helmrich, Lieut. Colonel 40th Mo.; aged 48 years.

HISTORY.—(ANTE MORTEM.)

Helmrich, a paroled prisoner, but still a stout muscular man, was admitted into Hospital March 24th, 1865. No reliable history of the case was obtained; it was understood that he had been sick only a short time. The most marked symptom was nervousness, shown by twitching of the corners of the mouth, occasional jerking of muscles of limbs, especially when touched, tremulousness of the tongue and imperfect articulation dependent upon want of perfect control of the muscles of speech. The conjunctivæ were injected, the pupils contracted. He seemed to partially understand questions, especially when addressed in German, but his answers were incoherent and disconnected. He attempted to write his name, but his hand was too tremulous; he was then requested to spell it—when half way through he seemed to loose the connection and turned away impatiently. His pulse was soft and rather feeble.

On inspection a diffused rash of a purpura appearance was observed over the abdomen, chest and arms. He shrank from pressure over the epigastrium and abdomen generally.

Auscultation revealed slightly diminished respiratory murmur over the posterior surface of both lungs and a modification of bronchial breathing beneath the scapula on the left side; over the scapular space there was slight dullness on percussion. He stated that his bowels had not been moved for three days and that he had been vomiting.

Five grains of calomel were given at once and tinct. cinch. comp. two drachms with whiskey, one ounce ordered every third hour. Also beef essence was given. Counter-irritation applied to the epigastrium.

7 P. M.—Evidently worse; pulse feeble, hands cold; intellect more obtuse; had passed urine but there had been no alvine evacuation. A terebinthinate injection was ordered; stimulants continued and counter-irritation applied to the back of the neck and spine. During the night he became more and

more comatose. Death ensued at 6 A. M. the morning after admission.

Reported by

G. H. DARE,

A. A. Surgeon U. S. A.

POST MORTEM.

Eleven hours after death.

Muscular system well developed.

Rigor mortis marked.

BRAIN.—Pacchionian bodies well developed. Pia mater adherent to the convolutions of the cerebra. Large quantity of serum under the visceral arachnoid over the surfaces of the cerebra. About two ounces of bloody serum were observed under the tentorium after removal of the brain. Brain substance quite firm. Numerous puncta observed in the white substance. Serum observed in small quantity in both lateral ventricles. Near the foramen of Monro the large veins of the striated body were covered with translucent opacified membrane. The fornix presented numerous puncta at its union with corpus callosum posteriorly. The two great veins of the velum interpositum had an opacified covering like that of the striated body. From the under surface of the velum interpositum within these veins there were two collections apparently of fine granules, such as resembled very small choroid plexuses. These plexuses, so to speak, arose at a point near the foramen of Monro and ended above the pineal body.*

Third ventricle contained serum.

Valve of Vieussens was covered with intensely though delicately congested pia mater. Floor of fourth ventricle presented more discoloration than usual at the nib of calamus scriptorius and near openings of cerebellar ventricles. On each side of the floor, that of the right lower and nearer the origin of the auditory nerve of the right side, there was a point of scarlet color. That of the right was clearly an effusion, that on the left probably one. Still higher up on the floor of the fourth ventricle there were aborescences. Generally the floor of the

* A normal formation specially marked in this case.

ventricle was slightly reddened. Considerable congestion of the pons Varolii. At the base of the brain the pia mater was finely and generally congested.

Brain weighed $47\frac{1}{2}$ oz., measured 7 inches.

LUNGS.—Left of a dark color, darker posteriorly. Faintly crepitant on the upper part of lower lobe. Some pleuritic adhesions on the outer face of the lower lobe of this lung. Substance, on section of posterior portions, of blood red color. Bloody fluid was pressed from it. The whole lobe had a collapsed appearance. Under the pleura posteriorly there were some very dark spots.

The outer part of the right lung was covered with old pleuritic adhesion bands. This whole lung was greatly ingested with blood. Posteriorly and inferiorly sub-pleuritic adhesions of dark color were observed, thought not to be caused by effusion of blood.

Left weighed 27 oz. 4 dr., measured 8 inches. Right weighed 22 oz. 1 dr., measured $8\frac{1}{2}$ inches.

HEART.—Small white clot in right ventricle, communicating with a mixed clot, also soft, in right auricle. Perforate auricular septum. Small soft clot in left ventricle, somewhat mixed. None observed in left auricle. The organ thick walled, somewhat loaded with fat externally, about the auriculo-ventricular rings and lines of vessels.

Weighed 14 oz. 5 dr., measured $4\frac{1}{2}$ inches.

LIVER—of heavy specific gravity. Smooth on section, of reddish brown color with indistinct acini. In middle superior portion of right lobe a small calcareous mass was found, surrounded by a star shaped contraction of capsule. Substance of organ quite firm.

Liver weighed 3 lb. 13 oz., measured 11 inches.

SPLEEN much enlarged, capsule thickened. Organ greatly and decidedly softened.

Weighed 18 oz., measured $8\frac{1}{2}$ inches.

KIDNEYS.—Right congested about tubular portion, somewhat large size otherwise normal. Lobulated.

Left similar.

Right weighed 6 oz. 5 dr., measured 5 inches. Left weighed 7 oz., measured 5 inches.

GALL BLADDER.—Bile black, granulated, thick. Weighed 2 oz., measured 5 inches.

PANCREAS was very large, somewhat congested. A large calcareous mass was found in this organ which was preserved.

INTESTINES.—Discoloration and hyperæmia of ascending colon and cæcum. Hyperæmia of lower part of ileum. Peyer's patches distinct, hard to the feel and black pointed. Mucous membrane thinned. Intestines presented in certain regions a somewhat ironed appearance. In ascending colon and ileum mucous folds blackened. Dark discoloration in upper part of jejunum. General dark ash red discoloration of stomach internally. The ash red color affecting the great mucous folds inferiorly towards the pylorus. A cherry red color prevailed in the fundus of the stomach. Mucous membrane not apparently softened. Vessels beneath mucous membrane large and well marked.

Intestines 4 lbs. 12 oz.

[CASE NO. 48.]

HOSPITAL NUMBER, }
474.

Jacob Brubaker, corporal, Co. B, 12th U. S. Infantry; age, 21; nativity, Indiana; single.

HISTORY.—(ANTE MORTEM.)

Brubaker, a paroled prisoner of good physical development, was admitted into "National" Hospital March 17th, 1865, after twenty or thirty days sickness. Symptoms when admitted:—Fever; face flushed, pulse quick, anorexia, tongue slightly coated and rather dry, nervous disturbance, hesitation in articulation, twitching of corners of mouth, some tremulousness of tongue, hyperæsthesia, shrinking from pressure over the abdomen and chest, slight cough. The lungs were resonant on percussion; auscultation revealed over the posterior surfaces of lungs sibilant and sonorous rales. The bowels being constipated, mass hydrarg. and ext. colocynth. comp. were given as a purgative; subsequently tinct. cinch. comp. and wine were administered.

March 19th.—Nervous symptoms more marked—rolling restlessly from side to side in bed. A slight rash was observed over the abdomen and chest of a purpura hue, not elevated and not disappearing under pressure. There were one or two alvine evacuations a day. The tongue was drier than when admitted.

Emulsion of turpentine was tried but rejected by the stomach.

He continued in the same typhoid condition for a week, taking quinine, whisky, carbonate of ammonia, (with Brown's mixture as a vehicle), milk punch, beef essence, etc.

March 28th.—Seemed better; tongue moister; had some appetite; the rash had nearly faded away; he sat up a while in bed.

April 3d.—He was attacked with glossitis; tongue was swollen to the thickness of an inch, dry, red and glazed. For twenty-four hours he swallowed little or nothing, he then again took stimulants and nourishment.

April 4th.—His condition was somewhat improved but his tongue remained swollen. He said "he felt first rate and wanted to go home."

April 6th.—In the morning some stertor was noticed while apparently the patient was asleep. In the afternoon he was much worse.

April 7th.—Died comatose at 10 A. M.

Case reported by

G. H. DARE,

A. A. Surgeon, U. S. A.

POST MORTEM,

Twenty-nine hours after death.

Slight rigidity of the muscles. Emaciation. Sugillation.

BRAIN.—Small quantity of fluid in the sac of arachnoid. Pia mater injected, hard to detach from the cerebral surfaces. Subarachnoid fluid in small quantity about the base of the brain and in the valley of the cerebellum. Numerous puncta upon a cut surface of cerebrum.

The arachnoid observed to be generally opacified. There was a small quantity of limpid effusion in both the lateral and

in the third ventricles. Fifth ventricle was conspicuous with its contained fluid.

Effusion present in the fourth ventricle also, and it was thought that much that was originally in this ventricle had escaped. A line of congestion nearly an inch in length was observed to the left of the median line, the lower extremity just above the origin of the auditory nerves, on the floor of the fourth ventricle.

Numerous and conspicuous puncta were observed on sections of the pons, striated bodies and optic thalami. Substance of cerebrum more dense than that of cerebellum; not normally so, however.

Pacchionian bodies well developed.

Brain weighed 2 lbs. 12 oz., measured 7 inches.

LUNGS.—Posterior portions of both congested. The left presented in the upper and lower lobes posteriorly collections of lobules that appeared as if they had been distended and then had the air shut in; this appearance was marked in the upper lobe. Left lung measured 10 inches. The outlines of these emphysematous lobules, so to speak, were very distinct. In the lower lobe posteriorly an incision made through the centre of this collection from behind forwards exhibited dark spots, not exceeding in extent the size of one lobule in which the tissue was consolidated, friable, and of the same or greater specific gravity than water. The bronchial tubes of both lungs presented reddening of their lining membrane and a large quantity of translucent, bloody and tenacious mucus. Right lung measured 10 inches.

HEART.—Auricular septum imperforate. Loose coagulum in right ventricle and a similar one in right auricle. Left auricle and ventricle empty. Redness of ecchymosis was observed in the surfaces of the heart cavities. Valves normal. Substance of heart generally flabby. Weighed 11 oz. 4 dr., measured 5 inches.

LIVER of dull reddish brown color. Capsule thickened, presenting anteriorly on the upper surface of the right lobe two adhesions of the opposed serous surfaces. Anterior border of liver somewhat irregularly curved. Substance of organ firm and tough. One region of black congestion a line in thickness of small extent anteriorly inferiorly and to the right. Weighed

4 lbs. 1 oz., measured 11 inches.

SPLEEN of large size, firm consistence, generally of a dark red color, mottled on close inspection. Weighed 14 oz. 2 dr., measured 7 inches.

KIDNEYS flabby; cortical substance pale. Left weighed 5 oz. 5 dr., measured $4\frac{1}{2}$ inches; right weighed 5 oz. 2 dr., measured $4\frac{1}{2}$ inches.

SUPRA-RENAL CAPSULES considered healthy. Cortical substance of a yellowish color. Left more friable than the right.

PANCREAS presented a large head. Its section had a yellowish color. Weighed 4 oz. 5 dr., measured 6 inches.

INTESTINES.—Large intestine presented a blackened surface. In the ileum Peyer's patches were conspicuous and marked with black points. In the lower part of the small intestine hyperæmia (regional) and thinning of mucous membrane were remarked. In certain lines of congestion the blood appeared to have been exuded from the vessels composing them into tissues adjacent, so that aborescences were illy defined. Bile discoloration in the jejunum and duodenum. Fundus of stomach bile-stained deeply. Mucous membrane of this part of the organ stringy, firmly attached to the fibrous base; of brown red color, darker superiorly; latter color not apparently associated with hyperæmia. Isolated brown spots on mucous membrane.

GALL BLADDER.—Weighed 2 oz. 2 dr., contained about two ounces of amber-colored bile.

[CASE No. 49.]

HOSPITAL NUMBER, }
2326.

Michael Dougherty, private Co. E, 49th Pa.; age, 35 years.

HISTORY.—(ANTE MORTEM.)

Dougherty, a tough Irishman, was admitted into this Hospital October 22d, 1864. He was wounded at Winchester, Va., September 19th, 1864. Amputation had been performed at the lower third of the left thigh September 26th, 1864. When admitted retraction or sloughing had taken place and the bone was exposed. The granulations looked healthy:

Nov. 4th.—Secondary hemorrhage took place apparently from the femoral artery; reamputation was performed by Act. Asst. Surgeon G. H. Dare, U. S. A.; about two and a half inches of the bone resected, the artery dissected up and religated. The walls of the vessel were found thickened at the expense of the canal, which was very small.

Nov. 30th.—When the stump had nearly healed hemorrhage again took place during the night to the extent of about twelve ounces. Next morning the stump was laid entirely open and the bleeding vessel sought for, but it could not be found; hemorrhage could not be provoked. Lint was introduced and the wound allowed to heal from the bottom by granulations.

Tinct. Ferri Chloridi was freely administered.

During January two slight hemorrhages took place, which were easily arrested by pressure. February 1st the stump had nearly healed when hemorrhage came on for the fifth time—slight but frequent—once or twice within twenty-four hours; arrested by pressure on the artery at bleeding point. At the suggestion of the Surgeon in Charge ext. belladonnæ was used but without any apparent effect. After continuing at intervals for five days the hemorrhage ceased. Tinct. of iron was again given. The patient's general health improved and he did well in every respect until March 12th, when a series of hemorrhages again commenced. The stump became much enlarged and had a callous feel. The hemorrhages occurred at intervals of from twelve to forty-eight hours; at first slight and easily controlled by pressure.

March 17th.—During the night the bleeding was more profuse, the blood jetting out several inches from the limb. Next morning he had another hemorrhage. Asst. Surgeon Geo. M. McGill, U. S. A., in charge of Hospital, determined to ligate the femoral artery above. The patient was put under the influence of chloroform and an incision made five inches in length, commencing about two inches below Poupart's ligament and extending down the course of the limb. When the skin superficial and deep fascia were cut through a thick mass of fibrinous material was found; upon deeper incision a cavity or sinus was opened filled with pus and clotted blood; it extended up several inches from the end of the stump; the sheath and coats of the vessel were disorganized up to the termination of this sinus. Above the sheath of the femoral vessels was found, two and a half inches below the surface; it was opened; the femoral artery seen and felt; it was apparently healthy but there was no pulsation.* By means of an aneurism needle a ligature was passed around the vessel about an inch below the giving-off of the profunda. Next morning, March 19th, the patient had another quite profuse hemorrhage. The incision was extended up to Poupart's ligament and the sheath exposed above the profunda. The hemorrhage was found to proceed from a solution of continuity† in the femoral above where it had been tied, between that point and the origin of the profunda, thus accounting for the absence of pulsation noticed in the previous operation. A ligature was applied just above the profunda. There was obstinate bleeding from a vein on the pubic side at the upper end of the incision;‡ this also was ligated. The pa-

* Pressure had by this time been maintained for some time over the artery in the swollen groin, and there was no bleeding when this pressure was removed. It was thought at the time that a species of compression was maintained above by the inelastic tissues compressed about and upon the artery, an adequate means in measure in consideration of the feeble cardiac *vis a tergo*.

† This "solution of continuity" was an anterior slit presented in a portion of the artery, about an inch in length, in which there was considerable distension with softening and blackening of the coats. This diseased portion of the artery might properly be said to present appearances as if macerated and partly putrified. The walls of the diseased portion below the slit flapped together. It is worthy of note that the arterial tissue was healthy *below*, where first tied.

‡ Probably the remaining portion of the internal saphenous vein had been injured accidentally.

tient's condition was, subsequent to the operation, exceedingly feeble and prostrated from loss of blood. For twenty-four hours he vomited everything taken: his stomach then became retentive and he took stimulants and nourishment freely. His general condition continued to improve until March 25th, when during the night the vessel gave way at the ligature and there was a gush of blood, which was immediately arrested by the finger of the prompt and attentive chief nurse, Ben. Carman.

As the last and only resort ligature of the external iliac was resorted to. Hemorrhage was easily controlled by the finger applied to the bleeding mouth. An incision was made by Asst. Surg. McGill, U. S. A., about four inches in length, commencing at the outside of the external abdominal ring and extending nearly to the anterior superior spinous process of the ilium. The subsequent steps of the operation were performed in the usual manner and the artery ligated without difficulty or accident. After the ligation of the iliac there was no further bleeding from the upper orifice of the femoral but obstinate and quite profuse recurrent hemorrhage took place from the profunda; its mouth was caught up with the forceps but it gave way under the ligature. The vessel was again seized deeply with the bull-dog forceps which arrested the hemorrhage. The patient's condition was so exceedingly feeble that further attempts to ligate the artery were deemed inadvisable. The forceps were therefore left on, being retained in situ by a pyramid of lint.

Next morning the patient was found in a remarkably good condition; he had taken and retained stimulants and some nourishment and was smoking his pipe with apparent satisfaction. Another hemorrhage occurred in the night following the operation, which through the neglect of the nurse was not observed till the following morning when it had ceased. The second night after there was another bleeding.* Lint saturated with the solution of persulphate of iron was applied and a half-pound weight put on it.

March 29th and 30th there was no hemorrhage; the patient's condition continued very feeble.

March 31st.—Had two chills in the morning, followed by cold perspiration. The case looked very much like pyæmia.

* Both these hemorrhages subsequent to the ligation of the iliac and closure of the profunda were venous.

There were no symptoms of peritonitis. During the night patient had two slight hemorrhages.

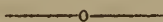
April 1st.—Looked better; took some nourishment; had slight chilliness in the morning.

April 2d.—Patient's condition had apparently much improved; he had eaten quite a hearty breakfast and was more cheerful. The bull-dog forceps still remained in the wound. The majority of the later hemorrhages had taken place apparently from above the profunda, and to the inner side, where the vein had been ligated.

April 5th.—Had a chill; was more feeble and prostrated.

April 6th.—Commenced to expectorate puruloid sputa; this symptom continued until his death. He sank slowly, intellect continuing clear until a few hours before death. At the midnight round he was smoking his pipe, though he told the medical officer of the day that he was dying.

April 8th.—He died at 6 A. M.



POST MORTEM.

Thirty hours after death.

Slight rigor-mortis; some slight emaciation. Surface of body very white and anemic. A great excess of adipose tissue was found over the anterior of the thorax and abdomen.

BRAIN.—About two ounces of serum in the sac of the arachnoid. Substance of the brain presented an anemic appearance; was of firm consistence. Very small quantity of serum found in lateral ventricles. Choroid plexuses and velum interpositum unnaturally anemic. Floor of the fourth ventricle normal.

Brain weighed 2 lbs. 15 oz., measured 7 inches.

LUNGS.—Surfaces of both almost universally covered with melanic matter. The lobules on the posterior surface of the lowest lobe of the right lung were filled with air.* Their outlines were well defined by lines of melanic matter. Substance of both lungs essentially healthy. The bronchial tubes well reddened and lined with mucus, but nothing was found to account for the puruloid character of the sputa observed for

* Meaning conspicuously distended.

two or three days before death. Weight of right lung 1 lb. 1 oz., measured 11 inches; left lung weighed 1 lb. 6 oz., measured 10 inches.

HEART.—A superabundance of adipose tissue over the surface. Clots composed of fibrin and black blood found in both ventricles; larger on the right side. Auricular septum imperforate. Weighed 1 lb, 6 oz.,* measured $6\frac{1}{2}$ inches.

LIVER.—Substance of a pale pinkish color and of firm consistence. Weighed 3 lbs. 12 oz., measured 11 inches.

SPLEEN of a light red color. Substance of an almost pulaceous consistence. Weighed 7 oz. 4 dr., measured $5\frac{1}{2}$ inches.

KIDNEYS.—Substance somewhat pale, organs in other respects healthy. Right weighed 6 oz., measured 5 inches; left weighed 6 oz., measured 5 inches.

PANCREAS normal; weighed 3 oz. and measured 6 inches.

GALL BLADDER filled with amber-colored bile. Weighed 4 dr., measured $2\frac{1}{2}$ inches.

INTESTINES.—Throughout the intestinal canal the mucous membrane was thin and pale. Some hyperæmia of the mucous membrane of the stomach, especially in the fundus. Weighed 4 lbs. 4 oz.†

EXAMINATION OF THE STUMP.—An abscess was found on the inner side of the bone, extending from above the giving-off of the profunda to the end of the stump. At the termination of the abscess there was a large pouch. This abscess contained about four ounces of pus. The tissues of the stump were pale and flabby.‡

Whole case reported by

G. H. DARE,

A. A. Surg. U. S. A.

* Clots and appendages included, of course.

† The peritoneum was perfectly healthy.

‡ A firm clot was observed in the iliac artery, above the ligature.

[CASE NO. 50.]

HOSPITAL NUMBER, }
345. }

Jacob Crow, corporal Co. I, 20th Ohio; age, 32; nativity, Ohio; single. Was admitted March 11th, 1865, from Annapolis, Md. He was a paroled prisoner.

HISTORY.—(ANTE MORTEM.)

PHYSIQUE.—Dark hair and eyes. Slightly emaciated.

CONDITION ON ADMISSION.—Patient has symptoms of incipient typhoid fever. Eyes heavy and expressionless; tongue dry and dark in the centre. Slight tenderness in right iliac fossa; some sordes about the teeth. Intellectual faculties obtuse; can give but little history of his past condition. Was placed on the usual treatment of typhoid cases and gradually improved until he was able to sit up for several hours a day. About April 1st a red spot appeared on the right cheek, which spread rapidly, and on the following day was pronounced to be erysipelas. The eruption soon covered his entire face to the margin of the hair, and spread over his eyes and to the back of the neck. He was treated with the external application of iodine, with regular and large doses of mur. tr. ferri. The erysipelas soon disappeared, when he in his sleep scratched off the cuticle from the right side of his face, which brought on a relapse of the disease, confined to that side. He became delirious at the subsidence of the eruption, which led to the apprehension that it had become plegmonous, which proved to be unfounded. The delirium assumed the form of almost mania. The patient was controled with much difficulty and at times with force. Large doses of opiates only exerted a temporary effect. This continued until opisthotonos came on and with it a partial unconsciousness. Mental action became more feeble until he died, April 10th, 1865.

Case reported by

W. G. SMULL,

A. A. Surgeon U. S. A.

POST MORTEM,

April 11th 1865, eighteen hours after death.

Good muscular development. Compact form, about five feet 7 inches in height. Slight rigor mortis. Considerable emaciation.

BRAIN.—Pia mater congested; not adherent. Puncta numerous, especially on the left side. Limpid serum in both lateral ventricles; at least an ounce in each. Floor of fourth ventricle slightly discolored; marked with lines of congestion, especially near the approaches of the cerebellar ventricles anteriorly, and presenting two small and regular congestions, half an inch apart, in the median line above the origin of the auditory nerves; the upper the smaller but the more intense. There was apparently some fine congestion of the pons and medulla. Cerebellum softer than cerebrum. Brain weighed 3 lbs. 2 oz., measured 7 inches.

LUNGS.—Substance of the right lung somewhat doughy, congested hypostatically; marked posteriorly with emphysematous lobules and presenting anteriorly a single band of adhesion adjacent to which was comparative solidification of pulmonary tissue. This was, however, not sufficient to make the specific gravity of the part affected by it greater than that of water. Left lung similar to the right. One interlobar adhesion band presented. A dividing sulcus by which a third lobe was formed was observed in the superior part of the posterior lobe. The small lobe observed was divided into three parts by secondary sulci. Several hard granular masses were found in this lung. Bronchial glands small and black. In the bronchi of the left side there was a puruloid fluid and the tubes were intensely congested; without tumefaction. The bronchi of the right lung were not so much congested and the fluid in them was frothy. Right lung weighed 1 lb. 12 oz., measured 10 inches; left lung weighed 1 lb. 9 oz., measured 9 inches.

HEART.—Mixed clot in right auricle, mostly white. Mixed white clot in right ventricle, attached as usual—more firmly than usual to the posterior (inner) cusp. Mixed clot in left auricle. White one in left ventricle, connected by a process with the apex. Ventricle clots ear-marked opposite valves.

Organ flabby (flaccid and pale colored), otherwise normal. Weighed 9 oz., measured $4\frac{1}{2}$ inches.

LIVER of natural color, consistence and general characteristics. Black congestion anteriorly inferiorly and to the left, affecting also the caudate lobe but not exceeding a line in depth. Weighed 2 lbs. 12 oz., measured 10 inches.

GALL BLADDER.—Bile of amber color, about an ounce in quantity.

SPLEEN large; somewhat blackened internally and inferiorly. Substance very easily pulped. Weighed 1 lb. 1 oz., measured 7 inches.

KIDNEYS slightly congested along the tubular lines. Right weighed 7 oz., measured 5 inches; left weighed 5 oz., measured $4\frac{1}{2}$ inches.

PANCREAS normal; weighed 4 oz., measured 7 inches.

INTESTINES.—The mucous membrane of the canal was thinned and readily to be separated by the finger. The intestinal surface was hyperæmic in the ileum, in the lower and upper part of jejunum and in the mucous folds of the stomach. Peyer's patches well defined, not apparently diseased; presenting black points (the "shaved chin"). Weighed 3 lbs. 14 oz.

Urine examined and found to contain no albumen.

[CASE No. 51.]

HOSPITAL NUMBER, }
578. }

Robert Minchion, private Co. D, 2d Mass. Vols.; age, 18; nativity, Nova Scotia. Admitted March 27th, 1865.

HISTORY.—(ANTE MORTEM.)

PHYSIQUE.—Lightly hair and eyes, fair complexion; muscular development good; body beginning to give evidences of emaciation. Personal cleanliness has been much neglected.

Patient on admission manifested symptoms of considerable nervous disturbance, was tremulous; tongue dry and coated with a dark yellow crust. But little tenderness over the abdomen. Evacuations regular. Over the lower extremities, from the hips downwards, was a peculiar eruption with a red areola encircling a dark centre in a state of incipient sloughing. They [these spots of eruption] varied in size from that of a five cent piece to that of a half dollar.

Patient complained much of the fatigue of travel and of previous hardships endured on Galloups Island, Boston Harbor. Stated that inferior food and great scarcity of water were the causes of his being in his present condition of prostration and filth. Patient was always perfectly rational when addressed, but slightly deaf. Slight stimulation followed by hygienic measures improved him for a time.

About one week after admission an eruption appeared on the left side of the face, near the angle of the jaw, extending slightly down the neck and resembling in appearance that produced by croton oil. In two days this became somewhat umbilicated in several places, for which reason he was isolated from the rest of the patients. The centres of the eruptions of the legs gradually sloughed. Symptoms of cerebral complications began to manifest themselves by patient's delirium, occasional incoherent answers to questions; followed by dimness of vision, contraction of the pupils, suffusion of conjunctivæ and gradually increasing opisthotonos. The patient remained in a state of partial coma until within twenty-four hours of death when he became wild and almost uncontrollable. This

was succeeded by great muscular prostration from which he could not be revived.

Patient died April 12th, 6 o'clock A. M.

Treatment throughout was adapted to indications; chiefly tonics and stimulants counter-irritants and revulsives.

Case reported by

W. G. SMULL,

A. A. Surgeon U. S. A.

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POST MORTEM,

April 19th, nine hours after death.

Body emaciated and rigid. Body marked by ulcerations, especially the lower extremities and the left side of the face and neck.

BRAIN.—Small quantity of fluid in the sac of the arachnoid, in which, especially on the right side, there were flakes of lymph. Pia mater was finely congested and presented filled veins. About the perforated spaces, commissure of the optic nerves, left fissure of Sylvius, anterior portion of pons and upon the arachnoid membrane stretched over the valley of the cerebellum, flakes of lymph, well marked, loosely and closely attached, were observed. Puncta numerous on eut surface. Large quantity (half an ounce, minimum estimate) of amber-colored floeculent liquid was observed in the right lateral ventricle. In the horns of this ventricle flakes of lymph were observed. Its lining membrane was intensely congested. The left lateral ventricle presented less fluid, a greater number of floeculi, and more intense congestion of the lining membrane. The third ventricle was filled with similar fluid, full of floeculi; these lodged principally in the infundibulum. Pineal body very large. The fornix and lower portion of corpus callosum were greatly softened; the former had the consistence of thick cream. The floor of the fourth ventricle was generally discolored. About the origin of the auditory nerves, on the left side above and below, on the right side upon the origin, small blood spots were observed. On the right side these spots were less intense—two in number with the smaller one below and to the right. On the left side there were seven spots:

five below and two above. The outlines of the originating auditory nerves were indistinct. On the left side superiorly in the approach of the left cerebellar ventricle there was a quadrilateral blood spot one line by two, so far as could be determined, underneath the lining membrane of the ventricle. Lower than this on the right side, in a related position, there was a stellate congestion. In the choroid plexuses of the lateral ventricles lymph was abundant. Brain weighed 2 lbs. 10 oz. 4 dr., measured 7 inches.

LUNGS.—Bronchial tubes of both finely congested. Left lung presented several *atelectases*, so to speak; otherwise normal. Posterior two-thirds of the uppermost lobe of the right lung pneumonified. The pneumonified substance was not easily pulped, granulating rather under pressure, still yielding a puruloid fluid. When observed closely a fine granular appearance was readily detected upon a torn or cut surface. The posterior portion of the lower lobe was finely nodulated to the feel and broke up readily under the finger. Substance on section presented a mottled appearance: grey mottlings in a cherry colored base. Substance of greater specific gravity than that of water. Left lung weighed 1 lb. 5½ oz., measured 9 inches; right lung weighed 2 lbs. 12 oz. 4 dr., measured 9 inches.

HEART.—Clot originating in right auricular appendix passed through the auriculo-ventricular opening and connected with clots attached along the anterior surface of the ventricle and based upon the three cusps and their tendinous cords. The base supported an arm, partly mixed and auricled, into the pulmonary artery. In the left auricle a clot formed by arms from the pulmonary veins joined a small band connected with the left auricular appendix and proceeded to be attached to the anterior cusp of the bicuspid valve. On the anterior surface of this cusp a small pyramidal clot was found, joining the base of which there was an arm extending into the aorta; arm also auricled. Heart weighed 11 oz., measured 4½ inches.

LIVER presented a mottled appearance superficially and a slight blackish injection inferiorly and anteriorly. Normal in consistence, color and other phenomena generally. Weighed 3 lbs. 11 oz., measured 11 inches.

SPLEEN.—Dorsum mottled, nodulated to the feel. Internal

surface mottled, black and injected. Section of substance presented a somewhat homogenous appearance and exhibited a substance of somewhat firm consistence. Weighed 10 oz. 4 dr.

KIDNEYS normal; somewhat injected posteriorly. Right weighed 6 oz. 4 dr., measured 5 inches; left weighed 7 oz., measured $5\frac{1}{2}$ inches.

SUPRA-RENAL CAPSULES of large size but of normal appearance.

PANCREAS normal; weighed 2 oz. 2 dr., measured $8\frac{1}{2}$ inches.

INTESTINES.—The large intestines were regionally hyperæmic, presenting a somewhat ironed appearance in the transverse and descending colon and somewhat contracted in the ascending. No marked phenomena except enlargement and definition of the colic glands.

Peyer's patches were well marked throughout the ileum, but not hyperæmic. The mucous membrane of the ileum was thinned and ironed. There was congestion of the mucous folds of the stomach. Weighed 4 lbs., measured 36 feet 6 inches.

SPINAL CORD.—A quantity of seroid fluid flowed out of the sac of the arachnoid while the spinal column was being broken open. The sac of the arachnoid was found occupied with a mass of lymph firmly attached to the visceral surface. Pia mater found congested. Spinal marrow was apparently softened and broken about the middle of the dorsal region. Softening also observed nearly opposite the first lumbar vertebra. The lesion in the dorsal region might possibly have been made accidentally while opening the column. The existence of softenings was undoubted.*

* It is my opinion that this case was originally one of modified variola of the confluent variety, in the course of which disease, under the cerebral type of disease prevailing, general cerebro-spinal meningitis supervened. The brain involvement presents the phenomenon of being symmetrical, instead of hemiplegic as ordinarily observed when complicating.

[CASE NO. 52.]

HOSPITAL NUMBER, }
619.

William Bogardus, Capt. Co. G, 86th Ill. Vols.; age, 43; nativity New-York; was wounded near Petersburg, Va., March 19th, 1865, and was admitted to Hospital April 10th, 1865.

HISTORY.—(ANTE MORTEM.)

The ball entered over the right sacro-iliac symphysis. About four inches from this point, in a line drawn downwards and outwards, in the gluteal region, on a level with the extremity of the coccyx, an incision had been made through which the ball was extracted. The patient stated that he had done well until three days before, when he was taken with chills and became rapidly worse. He was in a very low condition; had an involuntary alvine evacuation immediately after admission. He talked sensibly, but was nervous and flighty. Had just had a chill which he ascribed to not having passed water for thirty-six hours. About twenty-four ounces of urine were drawn off with great relief to the patient. The lungs were examined and no marked abnormality detected. There was little or no tenderness over the abdomen. Moist oakum was applied to the wound and tr. cinch. com., brandy, beef essence, etc., administered.

April 11th.—Was apparently in a dying condition; there had been frequent involuntary evacuations, thin and of a yellow color. Patient had another slight chill; intellect much obtunded; pulse exceedingly feeble. Catheterization performed; lead and opium given; stimulants pushed.

Afternoon.—Condition apparently improved; the diarrhœa had ceased.

April 12th.—Worse; had had several involuntary evacuations. Catheter used. Ordered pills of ext. nuc. vomicæ, opium and nitrate of silver.

Afternoon.—Sinking; bowels quiet.

April 13th.—Early in the morning the bowels again gave way. Died at 7 A. M.

Case reported by

G. H. DARE,

A. A. Surg. U. S. A.

*Duplicate
Surg. Records
Vol. 20. Page 21
J. H. Johnson*

POST MORTEM,

Seven hours after death.

Muscular system well developed. Slight rigor mortis. Sugillation.

BRAIN.—A quantity of serum was found in the sac of the arachnoid; about one ounce minimum estimate. Pia mater injected. Limpid serum found in lateral ventricles, and the lining membrane of these ventricles was ingested. No commissura mollis was found in the third ventricle. Pineal body small. On the floor of the fourth ventricle, in the median line, there was a marked line of congestion half an inch long, beginning a quarter of an inch above the origin of the auditory nerves. Puncta conspicuous on a cut surface. Substance of cerebrum firm. Brain weighed 3 lbs. 7 oz., measured 7 inches.

LUNGS.—Old pleuritic adhesions on the right side, saccular and interlobar. Whole of the right lung ingested. The posterior part of the lower lobe found so collapsed, carnified or cuirassed, as to be of the specific gravity of water. In the left pleural sac there was a large quantity of yellowish fibrin deposited on both the visceral and parietal surfaces. The left lung presented generally an ingested appearance similar to that of the right. In the lower lobe numerous fibrinous deposits were observed, which were readily broken down, forming thus a puruloid fluid. These deposits were considered so-called *metastatic* in character, the result of pyæmic* disease. In the middle of the exterior surface of the upper lobe of this lung, in the centre of a nodule of solidification about the size of a walnut, there was a white mass which readily broke up and upon pressure yielded at first a yellowish puruloid fluid and next a vermiform lymph-like matter. Tissue of this nodule sank in water. Most of the masses of white substance observed in the lower lobe broke up granularly. Left lung weighed

* During these post-mortems pyæmia was viewed as a vital condition of action, obtaining with equal force in all the centres of force in the body, originated by induction by contiguity from diseased surfaces and exhibiting by *remainder* or by *quality* in the specially predisposed centres of force the action of ineffective formation of tissues with its resultant fibrinous or, more generally, corpuscular lymph.

1 lb. 2 oz. 4 dr., measured 9 inches; right weighed 1 lb. 2 oz. 3 dr.; measured 9 inches.

HEART.—In the right auricle a clot originated in the appendix, was attached along the pectinate muscles of the base and connected with a clot that adhered to the anterior wall of right ventricle and was based upon the anterior and right cusps. The base of the latter clot supported an arm which extended into the pulmonary artery and was auricled opposite the pulmonary valves. The clots of the auricle and ventricle had a greenish hue; so had the lining membrane of these organs. A clot similarly colored and connected in the usual manner was observed in the left auricle and ventricle. Heart otherwise normal. Weighed 9 oz. 2 dr., measured 5 inches.

LIVER.—Of reddish-brown color externally; bile tinted upon section; somewhat too friable; nutmegged. The hepatic odor was rank, yet not to be perceived at the usual distance (that is, about four inches). Weighed 3 lbs. 13 oz. 4 dr., measured $11\frac{1}{2}$ inches.

GALL BLADDER.—About one and a half ounces of viscid bile, so tenacious that in pouring from the sac it formed a column eighteen inches long and quite stable, were contained in the bladder. Weighed 2 oz., measured $4\frac{1}{2}$ inches, (extremely).

KIDNEYS.—Tinged yellow. The pelvis of each presented a bile tint. Left weighed 5 oz. 3 dr., measured 5 inches; right weighed 6 oz., measured 5 inches.

Sacs of the supra-renal capsules distended with bloody fluid. Substance readily broken down into a greyish pulp.

PANCREAS normal; somewhat yellow. Weighed 2 oz., measured $8\frac{1}{2}$ inches.

SPLEEN of dark color, somewhat mottled externally and on internal section. Consistence normal. Weighed 9 oz. 4 dr., measured 4 inches.

INTESTINES.—In the large intestine which was generally dark colored and somewhat distended there were patches of lymph,* or substance like it, finely granular in structure, one-

* The appearance of lymph on the mucous surface of the large intestine, joined to that of the conspicuous patch observed near the beginning of the jejunum, suggests the hypothesis of a fibrinous lymph action in the basement membrane of the intestinal mucous membrane, corresponding generally to such fibrinous action of tissue as develops what has been viewed as metastasis and what in this case forms the fibrinous masses observed in the right lung. A diarrhoea under such circumstances may be pathognomonic of pyæmia.

layered and generally limited in extent to a single fold of mucous membrane. Minute hæmorrhagic spots, sporadic, were seen in descending colon and sigmoid flexure. The cæcum and ascending colon were darker than the remainder of the large intestine. In the upper part of jejunum there was a region in which greenish lymph flakes, granulated, were found on a red roughened base. These patches were apparently the result of inflammatory action.

THE WOUND.—Ball entered nearly opposite the transverse process of the right side of the fifth lumbar vertebra, passed inwards forwards downwards through the sacro-iliac junction, probably lodging in or beneath this junction viewed from behind. What was thought to be the ball was felt in this position, although statement had been made that it had been extracted on the field.

Friends of the patient were urging us so just here that it was found impossible to carry the examination farther.

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[CASE No. 53.]

HOSPITAL NUMBER, }
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Daniel Bivins, private Co. C, 133d N. Y.; age, 25; nativity, New-York; single.

HISTORY.—(ANTE MORTEM.)

Bivins was admitted on the evening of April 11th, 1865. Saw him next morning; he was then very restless and irrational, breathing with great difficulty, lips and face blue, pulse rapid and feeble. On percussion there was dullness over the right side of the chest anteriorly and posteriorly with fine crepitation and pleuritic sound over the lower lobe of the right lung anteriorly and laterally. Tongue was dry, brown and cracked; teeth covered with sordes. During the day he passed his feces and urine involuntarily and freely. Dry cups followed by blisters were applied to the chest and an anodyne given.

April 13th.—Not quite as restless as yesterday; unable to give any account of his case. Diarrhœa obstinate; breathing

apparently better, though the inflammation has extended over the whole of the right lung.

April 14th and 15.--Symptoms continue the same though the diarrhœa is increased. Turpentine has been given from the beginning. Beef essence and milk punch have been plentifully administered. He sank during the night of April 15-16th.

Case reported by

J. G. KELLER,

A. A. Surgeon U. S. A.



POST MORTEM,

Thirty hours after death.

Body not emaciated and but slightly rigid. The muscular system is pretty well developed. Considerable sugillation presented.

BRAIN.—Fine congestion of the pia mater. Fornix softened. Ingestion of the lining membrane of the ventricles presented. Limpid serum found in both lateral ventricles. Lines of congestion on the floor of the fourth ventricle, central and lateral, above the origin of the auditory nerves. Numerous conspicuous puncta were observed in the brain substance generally, more especially in that of the pons Varolii. Weighed 2 lbs. 15 oz., measured 7 inches.

LUNGS.—Evidence of hypostasis was presented in the inferior lobe of left lung, the posterior surface of which was mottled. In a considerable portion of this lobe a cut surface presented numbers of black spots, associated with the vessels and apparently formed by the infiltration of blood about the courses of these vessels. These spots broke up readily under pressure, yielding a blood-clot pulp. This lobe did not collapse or crepitate like healthy pulmonary tissue, except at the extreme anterior border. Black spots resembling bruises were presented on the posterior part of anterior lobe of this lung, (the left).

On the surface of the right lung there were old pleuritic adhesions and the lobes were bound together; only two lobes existed. Hypostasis in posterior portion of this lung. Fine

mottlings on a cut surface. Solidification tendency in tissue. Color and consistence of the substance of the posterior portion of this lung similar in characteristics to the corresponding part of the left. Substance nearly of the specific gravity of water. When the tissue of a black spot was broken up a liquid flowed from it like that which flows from a broken up black clot that manifests a tendency to organize.

HEART.—Auricular septum perforate. White clot in right auricle and in right ventricle, attached in the usual manner. Pulmonary arm auricled. A mixed clot found in left auricle. In the ventricle there was a thromb attached to the anterior cusp of the mitral valve. Valves and substance normal. Little or no tinging of the coats of the aorta. Weighed 15 oz., measured $5\frac{1}{2}$ inches.

LIVER.—Organ presented when viewed from above a mottled appearance, having broad dark bands and fine veins especially marked on the right. The basement substance (*inter acinos*) was of a yellowish red color. Section presented a nutmeg appearance. Consistence firm; organ not very full of blood. The tissue inferiorly had more blood than superiorly. Superficial black congestion centrally inferiorly along the anterior border. Weighed 4 lbs. 8 oz., measured $10\frac{1}{2}$ inches.

GALL BLADDER contained about one ounce of bile containing granules of cholesterine and of an amker color. Weighed 1 oz. 4 dr., measured 4 inches.

SPLEEN.—Normal in size; congested black superficially about the hilus. Weighed 8 oz., measured $5\frac{1}{2}$ inches.

PANCREAS flabby and bloody. Weighed 2 oz. 4 dr., measured 9 inches.

KIDNEYS.—Substance had a bluish appearance; no acute hyperæmia; slight hypostasis. Left weighed 6 oz., measured 4 inches; right weighed 5 oz. 4 dr., measured $4\frac{1}{4}$ inches.

INTESTINES.—No lesion other than hyperæmia in the large intestine. In the ileum and lower part of the jejunum there was marked enlargement of the solitary glands. Peyer's patches well defined. Mucous membrane thinned and softened. Hyperæmia well marked in the upper and lower portions of jejunum. Valvulæ conniventes in the upper part of the jejunum discolored with bile and ingested.

In the stomach blood spots were observed under the mucous membrane, following the course of the folds generally. A well marked region of apparent ecchymosis observed under the mucous membrane of the smaller curvature.

[CASE NO. 54.]

HOSPITAL NUMBER, }
2728. }

John Bramon, private Co. D, 16th Iowa; age, 42; nativity, Denmark. was admitted November 28th, 1864.

HISTORY.—(ANTE MORTEM.)

PHYSIQUE.—Light hair and eyes, fair complexion; somewhat enfeebled by previous sickness.

Patient stated that he had been attacked by intermittent fever sometime since, from which fever he is much prostrated and still liable to similar attacks. After admission he did not have an attack for one week, after which it (the fever) continued at regular intervals until its periodicity was overcome by quinia and alteratives.

Patient so far recovered in about three weeks as to be able to do light duty. With the exception of occasional attacks he enjoyed apparently good health until about April 1st, 1865, when he complained of having taken a heavy cold. This was soon succeeded by high fever, frequent coughing and slight expectoration of light rust-colored sputa. Examination showed dulness posteriorly of both sides of the chest beneath the scapula, with the crepitus of pneumonia over a space of a few inches square in each lung. Under treatment symptoms of pneumonia almost entirely disappeared; patient became able to sit up. His appetite returned and he began to gain strength.

April 10th.—Patient complained of great lassitude, loss of appetite and sleeplessness. Tongue became dry and dark. There was some abdominal tenderness in the right iliac fossa. Excretions scanty. On the following day a diffused eruption appeared on the entire body, of a reddish papular appearance. Patient was perfectly rational and complained only of excas-

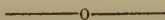
sive weakness. Appetite entirely deficient. He remained in this condition without apparent change until April 14th, when it was found difficult to elicit answers to questions. There was scantiness of excretions and a peculiar odor of the body. Urine examined and found to contain no albumen. Bowels opened by cathartics and enemas.

A sudden change came over the patient on the following day, April 15th. The surface of the body became mottled and cold. The face assumed a dusky hue. Tongue was protruded with much difficulty and was covered with a soft dark sordes. Eyes suffused and pupils contracted and responding very feebly to the action of light. No amount of revulsion could arouse him. The impulse of the heart became more feeble. He died at 5½ o'clock, P. M., April 16th, 1865. There was no opisthotonos throughout the case.

Case reported by

W. G. SMULL,

A. A. Surgeon U. S. A.



POST MORTEM,

Surface of body marked by spots of discoloration of different sizes, many of them running together as it were. Marked rigidity.

BRAIN.—About an ounce of serum in the sac of the arachnoid observed in the removal of the brain. Pia mater finely ingested. On the vertex of the right hemisphere there was a spot of ecchymosis as large as a cent; there was also a similarly situated spot, not quite so large, on the vertex of the left. The substance of the cerebrum was generally but slightly congested. Serum was found in small quantity in both lateral ventricles. A single central line of congestion was found on the floor of the fourth ventricle, above the origin of the auditory nerves. Brain weighed 2 lbs. 13 oz., measured 7½ inches.

LUNGS.—Pleuritic adhesions on both sides. No effusion of serum. Left lung collapsed and flaccid; ingested posteriorly. Right lung similarly affected. Posterior congestion resem-

bling ecchymosis. Right lung weighed 1 lb. 12 oz., measured 9 inches; left weighed 1 lb. 15 oz., measured $8\frac{1}{2}$ inches.

HEART normal; presented clots attached in the usual manner. Weighed 12 oz, 4 dr., measured $5\frac{1}{2}$ inches.

LIVER.—General congestion with regional discoloration of the organ. Substance of high specific gravity. Weighed 4 lbs. 5 oz., measured $11\frac{1}{2}$ inches.

SPLEEN greatly enlarged and softened. Weighed 2 lbs. 11 oz., measured 9 inches.

PANCREAS normal. Weighed 4 oz. 3 dr., measured 9 inches.

KIDNEYS normal. Left weighed 7 oz., measured 5 inches; right weighed 6 oz. 4 dr., measured 5 inches.

INTESTINES.—Hyperæmia of the ascending colon. Peyer's patches marked with black spots conspicuously. Some bile discoloration in the upper part of ilcum and lower part of jejunum. Regional hyperæmia in the ilcum. Ecchymosis under the mucous membrane of the fundus and lesser curvature of the stomach. Congestion of the duodenum with ironing. Weighed 4 lbs. 3 oz.

GALL BLADDER.—The bile found in the gall bladder was of a dark brown color.

[CASE No. 55.]

HOSPITAL NUMBER, {
651. }

Samuel Q. Hargrave, private Co. K, 152 Ind.; age, 19; nativity, Ind.
Admitted April 11th, 1865, from Stephenson Station Hospital.

HISTORY.—(ANTE MORTEM.)

History of the case somewhat obscure as the patient was delirious when admitted.

SYMPTOMS.—Pulse rapid and thready; tongue dry and of a light brown color; bowels constipated; pain and tenderness in the right iliac region; bladder full of urine. The head was extremely extended and on the back of the neck were marks of recent vesication. Pupils slightly contracted. No eruption was observed on any part of the body.

TREATMENT.—His bowels were moved by enemata. Urine drawn off in large quantity. A half grain of morphia was given and quiet sleep of several hours procured. Five grains each of quin. sulph. and potass. chlorat. were given every four or six hours, and beef essence, milk punch, and occasionally eggs, as a diet.

Patient, when not under the influence of anodynes, was extremely restless, tossing about in bed, and when not closely watched by the attendant would get out on the floor. Occasionally he would appear rational; and when addressed would answer questions, though briefly and incoherently. As far as could be ascertained he had been sick about ten days previous to admission. Cold applications were made to the head. Blisters were applied to the nape of the neck and down between the shoulders.

On the 19th his tongue was observed to be swollen and deglutition rendered exceedingly difficult.

Patient expired April 21st.

Opisthotonos continued extreme throughout the disease. An assistant (Mr. A. E. Hall) drew off the urine twice daily, in ordinary quantities, and frequently tested it finding it normal.

Case reported by

J. G. KELLER,

A. A. Surgeon U. S. A.

POST MORTEM,

Twenty-eight hours after death. Body slightly rigid and much emaciated.

BRAIN.—Between the arachnoid and pia mater, over the pons crura cerebelli perforated spaces and origins of fissures of Sylvius were thick deposits of lymph. At the termination of the fissures of Sylvius were other deposits: also others at the summits of the hemispheres. All these observed to be underneath the visceral arachnoid. No microscope was used, however in determination of this observation. In the right choroid plexus of third ventricle a sac of the size of a large pea was found, which contained lymph and pus. In the middle horn of the left lateral ventricle flakes of lymph were observed. Floor of fourth ventricle was reddened and presented numerous fine aborescences generally disposed over its surface. In the valley of the cerebellum another lymph deposit was found; this also under the visceral arachnoid. Pia mater was intensely congested universally. Veins greatly engorged. Cerebral puncta numerous. Fornix was thought to be softened. Substance of brain proper not apparently altered in consistence. The blood was fluid in the larger vessels. Brain weighed 5 lbs. 3 oz. 4 dr., measured 7 inches.

LUNGS were found generally congested posteriorly, but not intensely. Outlines of lobules well marked. In certain lobules, especially of the left lung, ecchymosis had apparently taken place. Over the surface of the right lung old pleuritic adhesions were found and its substance was somewhat carnified in consequence. A soft (concretionary) substance, concentrically marked, surrounded by well defined pearl-colored membrane, was removed from this lung and preserved in view of its probably illustrating the natural process of reduction of tuberculous matter into a calcareous salt. This view was strengthened by the presence of a similar body already calcareous in another portion of the lung. In the former substance no granulation was found. Right lung weighed 12 oz. 4 dr. measured 8 inches; left weighed 15 oz. 5 dr., measured 9 inches.

HEART.—Right side presented a large yellowish clot, dis-

posed in the usual manner. A similar clot was observed in the left side. Substance of organ very firm and of a deep red color. Weighed 11 oz. 2 dr., measured 5 inches.

LIVER.—Generally of a dark color. Mottled near junction of right and left lobes superiorly, with interjacent yellowish white substance, which affected the tissue of the organ to the depth of two lines or more. Substance generally of firm consistence, friable under firm pressure, very full of blood and possessing a strong odor. Weighed 3 lbs. 11 oz., measured 10 inches.

SPLEEN.—Normal in size and appearance; full of blood. Weighed 7 oz. 5 dr., measured 5 inches.

KIDNEYS.—Small and somewhat yellow in color; congested in dependent portions. Right weighed 4 oz. 1 dr., measured $4\frac{1}{2}$ inches; left weighed 3 oz. 1 dr., measured 4 inches.

INTESTINES.—Duodenum discolored. Hyperæmia in the upper part of the jejunum. Very marked hyperæmia of the ileum, especially of the lower portion. Solitary glands enlarged and Peyer's patches well developed. Congestion was so intense near the cæcal valve as to give the organ a dark-red color. Transverse and descending colon somewhat injected. Sigmoid flexure normal. Stomach congested along the mucous folds near the pylorus. Weight of intestines 4 lbs.

GALL BLADDER contained black and quite fluid bile.

SPINAL MARROW.—A grayish fluid flowed from the sac of the arachnoid of the cord when this was accidentally cut in the lumbar region during the process of extraction. Underneath the visceral arachnoid a great quantity of lymph was found, especially inferiorly: a deposit near the inferior termination of the marrow being from one to three lines in thickness. That it was under the visceral arachnoid and not in its sac was clearly demonstrated. Pia mater found intensely and finely congested. No bulbous enlargements or softenings of the cord were seen.

Urina cadaveris tested: found to contain no albumen.

[CASE NO. 56.]

HOSPITAL NUMBER, }
681. }

John Henry, an Indian, private Co. E, 1st Vt. Vols.; age, 29; nativity, Canada; admitted from Camp Parole, (near Annapolis, Md.,) April 18th, 1865.

HISTORY.—(ANTE MORTEM.)

The patient was admitted in an extremely feeble condition, and upon examination was found to be in the last stages of phthisis pulmonalis. Over the whole surface of the chest the sound was dull on percussion, and on the right side anteriorly and posteriorly humid crackling sound well marked was heard on auscultation. Cough very annoying; diarrhœa obstinate. With a view of checking the bowels tannin was prescribed. Stimulants and nourishing diet were given. A slight improvement was observed after second day, which proved only temporary. Died April 21st, 1865.

Case reported by

J. G. KELLER,

A. A. Surg. U. S. A.

 POST MORTEM,

Fourteen hours after death.

No rigor mortis. Muscular system not developed.

BRAIN.—About two ounces of serum flowed from the sac of the arachnoid while the brain was being taken out. Substance of organ normal. Limpid serum in small quantity found in lateral ventricles and a few fine lines of congestion on floor of fourth ventricle. Organ weighed 42 oz., measured 7 inches.

LUNGS.—Pleuritic adhesions general. About eight ounces of serum in left pleural sac. Substance of lungs of high specific gravity, dull water-red color darker posteriorly, yielding on pressure from sections large quantities of frothy, bloody, watery fluid. About middle of upper lobe of left lung a cut surface presented a collection of tubercles of the size of a pea, softer in their centres. Spots of ecchymosis were observed on

cut surfaces of this lung. The substance of the right lung presented characteristics similar to those of that of the left; but the miliary tubercles, frequent in the left, were very rare and isolated in the right. Left lung weighed 1 lb. 15 oz., measured 9 inches; right weighed 2 lbs. 1 oz., measured 10 inches.

HEART normal. Shreddy clots of little apparent significance observed on both sides. Finely granular patches observed on the pericardium were supposed to be collections of miliary tubercles in that membrane. Weighed 11 oz. 5 dr., measured 5 inches.

LIVER light colored and very flaccid. Substance broke up readily under pressure of the finger without any laceration of the capsule. Weighed 2 lbs. 15 oz., measured $11\frac{1}{2}$ inches.

SPLEEN.—Dorsum of bright red color. Internal surface nearly black. Substance homogeneous of nearly natural consistence. Seven clefts of varying depth were observed on the anterior border of this organ, Weighed 5 oz. 5 dr., measured 4 inches.

GALL BLADDER contained about three ounces of amber-colored bile. Weighed 3 oz. 1 dr., measured $4\frac{1}{2}$ inches.

KIDNEYS large and firm, of light color. Left weighed 5 oz. 2 dr., measured $4\frac{1}{2}$ inches; right weighed 5 oz. 3 dr., measured $4\frac{1}{2}$ inches.

SUPRA-RENAL CAPSULES light colored.

PANCREAS darkly discolored at the left extremity. Weighed 3 oz., measured 10 inches.

INTESTINES.—Stomach enlarged; mucous membrane softened. Some regional hyperæmia in jejunum. Intestines flaccid and thin. Ileum ironed. In this organ it was thought that isolated tubercles were presented beneath the mucous membrane. The distinction however between these and solitary glands was not clear. Some hyperæmia of ascending colon. Remainder of large intestine nearly normal. Some dark discoloration. Weighed 3 lbs. 4 oz.

[CASE No. 57.]

HOSPITAL NUMBER, }
607.

Thomas Green, private, unassigned; age, 22; nativity, England. Admitted to Hospital April 6th, 1865, and died May 7th, 1865.

HISTORY.—(ANTE MORTEM.)

Thomas Green, unassigned substitute, physically well developed, was admitted into this Hospital April 6th, shot by a detective the day before. The ball entered half an inch to the right of the spinous process of the tenth dorsal vertebra and lodged. Complete paraplegia immediately resulted, both of sensation and motion. There was very little constitutional irritation; he suffered no pain. Neither the bladder nor the bowels were evacuated. A catheter was inserted and half a pint of urine drawn off. An anal injection was administered but it was returned without fecal matter. A dose of castor oil was afterwards given and was followed by several thin involuntary discharges.

The catheter was introduced twice a day until April 15th, when the urine began to leak away freely and the bladder could be emptied by pressure upon the hypogastrium. The prepuce had become oedematous and so much swollen as to conceal the meatus and give rise to phimosis.

April 17th.—A bed-sore made its appearance.

Up to this time the patient's constitution had apparently suffered but little. He had complained of no pain. His appetite had been good and he had slept well at night. The bed-sore extended until it had become twice the size of the palm of the hand, exposing the sacrum.

April 23d.—Patient had a slight chill followed by copious perspiration. The chills persisted one or two a day. The patient lost appetite, assumed a hectic or pyæmic appearance and declined rapidly. The excretions continued to be voided involuntarily.

April 30th.—The patient was attacked with singultus.

May 5th.—Patient was in a partially comatose condition. Pupils dilated; pulse rather full but soft. Intellect very much obtunded. He swallowed with difficulty. Mortification had

*Emp. Surg. Records
Vol. 3. Page 138
Duplication
Sacrum*

commenced at various points on the leg where pressure had existed. The coma deepened and the patient died May 7th, 1865.

Case reported by

G. H. DARE,

A. A. Surgeon U. S. A.

POST MORTEM,

Nineteen hours after death.

Body very rigid and somewhat emaciated. Sloughing of prepuce caused by incessant trickling of urine the sphincter muscles of the bladder and urethra being paralyzed. Marks of sloughing on left leg at external malleolus and outside of knee. A large bed sore exposing the sacrum. Great sugillation.

BRAIN.—Pia mater ingested and detached with difficulty from cortical substance. At base of brain ash-colored lymph was observed from the optic chiasm and fissures of Sylvius to the valley of the cerebellum; not extending however to the sides of the cerebral hemispheres. This lymph had bluish color and was soft. Pia mater and visceral arachnoid detached generally with difficulty from brain surfaces. Serum found in both lateral ventricles in small quantity and tinted red. The corpus callosum and fornix, but especially the latter, which was like very thick cream, were much softened. The velum interpositum was tense, opaque, thick and firmly attached to the choroid borders. The lining membrane of the third ventricle, as well as that covering the lateral ventricles, had a red hue. The fourth ventricle was similarly affected and presented in addition three lines of congestion, the middle about one quarter of an inch above the centre of audition. The lymph deposit did not apparently take place upon the floor of this ventricle. Substance of brain generally was a little softer than normal. Weighed 2 lbs. 15 oz.; measured 7 inches.

LUNGS.—Right lung generally dark colored, having natural appearance upon edges anteriorly; posteriorly it had a doughy feel and its substance gave way readily under pressure. In-

tense discoloration was confined to certain lobules. A serous infiltration appeared to affect the interstitial tissue of the organ generally, but especially posteriorly. Bronchial tubes normal. Left lung weighed 1 lb. 11 oz., measured 10 inches. Right lung weighed 2 lbs., and was similar in all respects, except that there appeared to be more intense congestion posteriorly.

HEART.—Large black clot found in right side; the portion of this in right auricle filled it to distension. Loosely clotted black blood found in left side. Organic tissue of heart normal. Weighed 13 oz., measured $5\frac{1}{2}$ inches.

LIVER.—Large, light colored, of fine consistence, having a strong smell, full of blood, having a substance pungent and sweet and organically homogeneous. Weighed 5 lbs. 4 oz., length 12 inches.

SPLEEN of light color, very flexible, of normal consistence and organically homogeneous. Weighed 7 oz. 2 dr., measured 6 inches.

KIDNEYS somewhat full of blood. Right weighed 5 oz. 5 dr., length 5 inches; left weighed 5 oz., length $5\frac{1}{2}$ inches.

SUPRA-RENAL CAPSULES very large, each three inches long.

INTESTINES.—Slight hyperæmia in cæcum and ascending colon. Solitary glands prominent. Ironing of ileum; Peyer's patches conspicuous. In the lower part of it the jejunum was much discolored with bile. There was congestion of the fundus of the stomach.

THE WOUND.—Ball entered to the left of the spinous process of the tenth dorsal vertebra and, penetrating to the canal, severed the cord above the lumbar swelling. Adhesions formed between the parietal and visceral arachnoid and lymph, degenerated anteriorly in some localities to a puruloid fluid, covered the cauda equina to the medulla oblongata. Some discoloration on the inside surface of the spinal dura mater, above the seat of injury, was observed; and, at the seat of injury, superiorly and posteriorly there was a spot of intense redness, such as might lead one to speculate on the conservative process of nature. In the immediate seat of injury the cord appeared to be softened and to have its grey matter thickened.

[CASE NO. 58.]

HOSPITAL NUMBER, }
783. }

Tobias Gibbins, Rebel paroled prisoner; residence, Cleveland, Ohio; nativity, Maryland; age, 45. Admitted to Hospital May 6th, 1865, and died May 10th, 1865.

HISTORY.—(ANTE MORTEM.)

PHYSIQUE —Brown hair, light eyes; muscular system emaciated. Bilious and sanguine temperament. Patient admitted in a state of great prostration; answers questions vaguely and without connection of ideas. Can give no definite account of himself nor the history of his sickness. Surface of the body dry and cool. Skin flaccid; circulation feeble, pulse 100; respiration normal in frequency. Eyes heavy and expressionless: pupils respond to light slowly and imperfectly. There was slight tenderness over the abdomen, more intense in the right iliac fossa. Tongue dry and protruded with difficulty.

Examination of the chest by percussion showed dullness posteriorly and inferiorly, involving the larger portion of both lungs: on the right side extending almost to the apex of the lung. Auscultation elicited bronchial respiration in the lower half of the right lung, with occasional ronchus; crude crepitation was discovered in the posterior portion of the same lung. In the left lung the same character of crepitation was discovered in the lower portion posteriorly but became finer towards the middle and superior portion of the lung. There was no cough, no expectoration indicative of pulmonary disease and patient complained of no thoracic pain. The treatment was essentially stimulant, with all the nourishment that he could be induced to take. Patient sank slowly and perceptibly until early in the morning of May 10th, when he died without having been thoroughly conscious from the time of his admission.

Case reported by

W. G. SMULL,

A. A. Surg. U. S. A.

POST MORTEM,

Twelve hours after death.

No rigor mortis. Considerable emaciation.

BRAIN normal. Possibly the fornix and corpus callosum were softened. About two drachms of serum were observed in each lateral ventricle. The brain weighed 3 lbs. 9 oz., measured 8 inches.

LUNGS.—Lower lobe of right was in a state of grey hepatization. Puruloid fluid was expressed abundantly and the tissue involved was of greater specific gravity than water. Slight pleuritis observed, chiefly interlobar, by which there was lobar attachment. Posterior part of superior lobe was congested to blackness and of greater specific gravity than water. The remaining substance of the lung had a doughy feel. Of left lung the posterior part of lower lobe was intensely congested. Substance engaged was quite tough. From it on pressure a quantity of bloody fluid came. Right weighed 3 lbs. 8 oz., measured 11 inches; left weighed 1 lb. 13 oz., measured $10\frac{1}{2}$ inches.

HEART normal; perhaps too greatly loaded with fat externally. Its cavities were occupied with white clots, disposed and attached as usual. Weighed 14 oz. 2 dr., measured 6 inches.

LIVER of somewhat light color and firm substance, presenting superficial black congestion inferiorly. Weighed 4 lbs. 14 oz., measured 11 inches.

GALL BLADDER half full of semi-transparent brown bile. having a dark tinge. Weighed 1 oz. 3 dr., measured $4\frac{1}{2}$ inches.

SPLEEN.—Capsule slightly thickened. Substance firm. Some blackening observed inferiorly. Weighed 11 oz., measured 5 inches.

PANCREAS normal; very flaccid. Weighed 4 oz. 3 dr., measured 8 inches.

KIDNEYS somewhat enlarged and full of blood. Right weighed 9 oz. 4 dr., measured 6 inches; left weighed 8 oz. 2 dr., measured $5\frac{1}{2}$ inches.

SUPRA-RENAL CAPSULES enlarged and firm.

INTESTINES.—Discoloration and some softening of the walls so as to make them easily torn, was observed in the large intestine. Stomach discolored, (blackened). No lesion observed in small intestine. General flaccidity and regional discoloration by bile.



[CASE No. 59.]

HOSPITAL NUMBER, }
705.

Sydenham Stahl, private Co. C, 11th Md. Vols.; single: nativity, Maryland. Admitted to Hospital April 28th, 1865, and died May 12th, 1865. Residence previous to enlistment, Baltimore, Md.

HISTORY,—(ANTE MORTEM,)

Wanting. Patient was treated by A. A. Surgeon Charles W. Neff, U. S. A., who was requested to furnish ante-mortem notes, but never complied.

POST MORTEM,

Eight hours after death.

No emaciation; slight rigidity. Sugillation marked.

BRAIN.—Congestion of the pia mater. Some effusion in the sac of the arachnoid, reddening of the outer surface of the right hemisphere, and, at the summit of the brain, full veins and such attachment by the action of the paechionian bodies as caused rupture of the large veins of the pia mater in removal of brain. A little serum was found in the lateral ventricles. There were lines of congestion on the floor of the fourth ventricle, chiefly on the left side superiorly. In the white substance of the brain numerous puneta were observed. Pia mater was detached with trouble. Brain weighed 54 oz. 5 dr.; measured 7 inches.

LUNGS.—Both were full of blood. In the posterior part of right lung numerous minute nodules resembling in feel miliary

tubercles were observed. On close examination these were found to occupy the centres of pulmonary lobules in association with the bronchial tube of the lobule, which tube was filled with a thick bluish-white puruloid fluid and was itself dark red or dark purple internally. The small bronchial tubes appeared to be thickened in several instances and themselves gave rise to a pointed feel. The nodular feel described obtained in both lungs, but more especially in the right. A small portion of the posterior part of uppermost lobe of right lung sank in water.* Right weighed 1 lb. 7 oz., measured 9 inches; left weighed 1 lb. 6, oz., measured 9. inches,

HEART.—Large mixed clot in right auricle, connected by an isthmus with pyramidal black clot in right ventricle, which was strongly attached to the anterior cusp of the tricuspid valve. This clot of the right ventricle was slightly connected with the apex. It gave rise to a clot markedly auricled which extended into the pulmonary artery. Left side was occupied by a loose mixed clot arranged in the usual manner, similarly auricled opposite semilunar valves. Heart weighed 16 oz., measured $5\frac{1}{2}$ inches.

LIVER.—Of lead color and finely mottled superiorly on the left side and inferiorly on the right. The under surface had a light brown color. Substance friable, dark reddish brown on section and very full of blood. Weighed 5 lbs. 2 oz., measured 12 inches.

GALL BLADDER contained amber-colored bile in small quantity. Weighed (contents included) 2 oz., measured 4 inches.

SPLEEN of very dark color; flaccid, Weighed 1 lb., measured $8\frac{1}{2}$ inches.

PANCREAS normal. Weighed 5 oz., measured 8 inches.

KIDNEYS.—Intercolumnar congestion. Right weighed 5 oz. 5 dr., measured 5 inches; left weighed 5 oz., measured $4\frac{1}{4}$ inches.

SUPRA-RENAL CAPSULES firm and well developed. Right weighed 2 dr., measured 2 inches; left weighed 2 dr., measured $1\frac{1}{2}$ inches.

* The nodular condition was theoretically attributed to the valvular action of the plug at the exit of a primitive lobule in association with development of limited inflammation after collapse, attended with formation of inflammatory products in the air cells adjacent.

INTESTINES.—With exception of hyperæmia of the rectum, sigmoid flexure of colon and of the cæcum, the large intestine was normal. A pultaceous yellowish mucus was found in lower part of ileum, associated with hyperæmia and thinning of the gut. Great congestion in the upper part of ileum, which was not presented in the jejunum. Duodenum congested; duodenal glands enlarged. Stomach covered with a greenish pultaceous mucus. Fundus reddened, the reddening extending to the cardiac orifice. In the œsophagus serrated patches of yellowish lymph like substance, firmly set in the mucus membrane, were observed. The appearances were such as one might have expected had the patient swallowed a piece of red hot iron. Intestines weighed 3 lbs. 10 oz. The lower part of œsophagus preserved.

[CASE No. 60.]

HOSPITAL NUMBER, }
787. }

Anson Morse, private Co. L, 193d N. Y. Vols.; age, 16; nativity, New-York. Admitted to Hospital May 10th and died May 16th, 1865.

No ante-mortem furnished.

POST MORTEM,

Sixteen hours after death.

Body of good form, emaciated; sugillation; post-mortem rigidity.

BRAIN.—Fine congestion of pia mater with opacity of arachnoid and adhesion to brain substance. Small quantity of fluid in lateral ventricles. Slight reddening of the floor of the fourth ventricle. No decided lines of congestion. Substance of brain generally quite full of blood. A spot of blood effusion was observed on right hemisphere laterally inferiorly. This might have been caused in removal of the brain for the blood of it was fluid. Brain weighed 49 oz., measured 8 inches.

LUNGS.—Both very full of blood. In posterior portions of right and in lower lobe of left, more especially in the latter,

carinated lobules were observed, possessing the usual characteristics of color, toughness, flexibility and specific gravity. Pulmonary substance near the lower border of upper lobe of left lung, laterally, to a volume of more than four cubic inches, was found in the second stage of pneumonia. Section of substance marbled yellow and red. Internal surface of bronchial tubes reddened. Right lung weighed 1 lb. 3 oz., measured 9 inches; left weighed 1 lb. 8 oz., measured 9 inches.

HEART.—White clot in right side arranged in the usual manner, of large size, tough and flexible. Mixed clot in left auricle. Slender anterior cusp clot in left ventricle. Markings on arms of ventricular clots by semilunar valves. Much of the blood was fluid. Heart weighed $8\frac{1}{2}$ oz., measured $4\frac{1}{2}$ inches.

LIVER.—Very flexible; pale colored; pink hue on section which at first sight exhibited substance nearly homogeneous. The substance was easily pulped. Organ weighed $4\frac{1}{2}$ lbs., measured 11 inches.

SPLEEN small, very flexible. Black discoloration of surface internally inferiorly. Capsule was thick and tough. Weighed 9 oz., measured 4 inches.

GALL BLADDER greenish externally, contained a black mobile fluid.

KIDNEYS normal. Left weighed 5 oz., measured $5\frac{1}{2}$ inches; right weighed 6 oz., measured 5 inches.

PANCREAS normal. Weighed 3 oz., measured 7 inches.

INTESTINES.—Intestinal coats greatly relaxed. Ironing in lower part of jejunum and ileum associated with hyperæmia and bile discoloration superiorly. Tumor of solitary glands. In lower part of ileum tumor of Peyer's patches was associated with reddening and was very marked. The tumor of solitary glands and their conspicuous appearance were more marked about termination of ileum. Flaccidity, slight discoloration and hyperæmia were observed in cæcum, ascending colon. Portion of transverse colon and sigmoid flexure.

HICKS, U. S. ARMY GENERAL HOSPITAL.

PART II.

ANTE AND POST-MORTEM RECORD.

[CASE NO. 1.]

PATRICK LYNCH, private Co. A, 65th Ill.; age, 17. Admitted into Hospital July 20th, 1865, and died July 27th, 1865.

HISTORY.—(ANTE MORTEM.)

This patient first came under my care July 25th, at which time he was very much reduced with fever attended with diarrhoea and constant delirium, so that it was with difficulty that the nurse could keep him in bed. I learned that he had not slept for forty-eight hours, Prescribed astringents, alteratives and anodynes; applied cold to the head.

July 26th,—Patient slept last night; is more quiet than yesterday. Pulse very small, tongue dry and hard. The patient was ordered chlor. potash.

July 27th.—Patient died.

Case reported by

GEO. W. FAY,

A. A. Surgeon U. S. A.

POST MORTEM,

BRAIN.—There was about an ounce of clear fluid in each lateral ventricle. Large quantity of similar fluid found in sac of arachnoid, estimated at two ounces.

Blood fluid generally.

LUNGS.—The posterior portions were deeply ingested and there was a region in one lung anteriorly in which there was an appearance of ecchymosis.

In colon minute purpuroid spots of oval outline were observed.

ILEUM.—Peyer's patches were found greatly enlarged, light colored, well defined and ulcerated. Solitary glands enlarged, very conspicuous.

[CASE No. 2.]

THOMAS BROWNSON, private Co. F, 187th N. Y.; age, 25. Admitted July 24th, 1865.

POST MORTEM,

EXTERNAL APPEARANCES.—The general surface and conjunctivæ of a yellow tinge. Body very much emaciated. Muscular system rigid; very little subcutaneous fat.

BRAIN.—Superficial appearance exsanguine. In the inferior part of the valley of the cerebellum, more on the left side, a dark spot was observed of trapezoidal outline. Upon lifting the arachnoid this spot was found to be a clot of blood situated between the arachnoid and pia mater. This clot was carefully lifted and traced to a break in a vessel on the right side of the valley, which break was indicated by a granulated appearance and firm attachment of the vessel at the point of rupture to parts in the vicinity. A large quantity of subarachnoid fluid was found in the valley. Arachnoid and pia mater firmly attached to substance of cerebellum. Pacchionian bodies well developed. A large quantity of fluid was found in left ventricle. Brain weighed 2 lbs. 4 oz. 2 dr.

HEART of natural size, flaccid, and loaded with yellowish fat. A dark colored clot was observed in right ventricle, attached to the anterior wall; extending into pulmonary artery an arm that was ear-marked and bifurcated. In left side a mixed clot arose in auricle and extended to a ventricle clot that extended an auricled arm into the aorta. Heart weighed 12 oz. 4 dr.

LUNGS.—Right lung flaccid, some little œdema posteriorly; netted with melanic matter. Left lung exhibited a little œdema posteriorly, was marked as right with melanic matter. Right weighed 1 lb.; left weighed 12 oz.

LIVER.—Left lobe was of a yellowish color somewhat darkened, covered inferiorly and anteriorly with thick flakes of organized lymph. In right lobe there were several abscesses, varying in size. The largest contained at least one quart, the smallest not less than two ounces, of pus that varied from a dark yellow colored flakey fluid to a thick and almost caseous

white substance. Right lobe, with exception of a small region superiorly and posteriorly, was covered with a thick layer of organized lymph. Beneath this collection of lymph in the summit of the right lobe there was a region of deep red congested tissue. This condition was supposed to be one that should precede the formation of an issue for pus into the lung. Liver weighed 8 lbs. 8 oz. 4 dr.

INTESTINES.—The substance of the large intestines was thickened, darkened and contracted, and so thinned by internal ulceration in several points that it was torn during extraction and opening. In one instance there was perforation. The ulcerations were regional and often connected; they had deep sharp edges, were dark colored and extended nearly through the muscular coat, so as in the aggregate seriously to weaken the intestinal walls. In several instances the pits of ulceration communicated with the peritoneum; one caused the perforation mentioned. This perforation was rendered impermeable by agglutinated surfaces of peritoneum. Thick flakes of lymph were observed in the lesser sac of peritoneum.

SPLEEN enlarged, purple externally, covered with flakes of lymph. Its substance, of dark red color, was firm. Weighed 15 oz. 4 dr.

KIDNEYS.—In the right kidney there was a cyst of the size of a pea. The left was normal in size and substance. Right weighed 9 oz.; left weighed 8 oz. 4 dr.

[CASE No. 3.]

CHARLES JILLISON, private Co. G, 146th Ind. Vols. Admitted into Hospital August 2d, 1865.

HISTORY.—(ANTE MORTEM.)

The patient complained of pains in the hypogastric region, having from thirty to forty passages every twenty-four hours, No appetite; pulse ninety; tongue dry.

TREATMENT.—Opiate injections. The patient was ordered milk punch, one pint daily, with beef essence. He improved slowly under this treatment until the 5th, having only four or five passages per day. The night of the 5th he grew rapidly worse and died at eight o'clock on the morning of the 6th.

Case reported by A. A. Surg. SMITH, U. S. A.

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POST MORTEM,

BRAIN.—Slight opacity of arachnoid; a small quantity of subarachnoid fluid. Moderate ingestion of brain substance. Considerable fullness of large vessels of pia mater. A very small quantity of fluid found in lateral ventricles. Brain substance of normal consistence, softer in cerebellum than in cerebrum. Brain weighed 3 lbs. 2 oz.

LUNGS.—Edema of posterior portions; from cut surface a large quantity of bloody and frothy fluid was readily expressed. Color of posterior portion slaty; somewhat mottled with red and pink anteriorly, where the substance was normally crepitant. The weight of each lung was 1 lb. 10 oz.

HEART small but normal. Black clot in left ventricle; mixed clot in right. Weighed 8 oz.

LIVER of natural size and consistence, somewhat dark colored; quite full of blood. Marked by old bands superficially and superiorly over small portions of right lobe. Capsule readily detached. Bile scanty and of a yellowish color. Weight of liver 5 lbs. 6 oz.

PANCREAS normal; weighed 2 oz.

KIDNEYS normal. Tubular portions well marked. Weight of each kidney 5 oz,

SPLEEN somewhat enlarged, dark (of the appearance of currant jelly), and of a normal consistence. Weight of spleen 6 oz.

INTESTINES.—General hyperæmia and inflammatory congestion of ileum. Enlargement and occasional ulceration of Peyer's patches; ulceration specially marked near cæcum: congestion general. Upper part of the jejunum and duodenum stained with bile. Congestion of fundus of stomach and discoloration and linear congestion of œsophagus. Contents of large intestine semifluid, consisting of gelatinous substance, dark green, mixed with yellowish, fibrous and granular matter.

Case 200
2nd Vol

[CASE NO. 4.]

JOHN HILMAN, private Co. E, 28th Iowa Vols.; was admitted August 6th, 1865.

HISTORY.—(ANTE MORTEM.)

The patient complained of diarrhœa and of pain in lower portion of hypogastric region. He had from thirty to forty passages in twelve hours with involuntary evacuations during sleep. Pulse one hundred (?). Tongue dry. No appetite. Treatment, opiate injections.

He did not improve but sank rapidly and died August 8th, 1865.

Case reported by

A. A. Surg. SMITH, U. S. A.

POST MORTEM,

Twelve hours after death.

Rigor mortis great. Slight emaciation.

BRAIN flaccid. Large veins of pia mater full; general ingestion of this membrane. Above the origin of the auditory nerves on the floor of the fourth ventricle, more conspicuous on the left side, there were several stellate spots, probably originating in effusion of blood. Weighed 3 lbs. 7 oz.

HEART flabby, of a blood red color. A white clot was observed in right side, which arising in auricular appendix extended into the right ventricle, connected with a pyramidal clot attached to the anterior wall, which latter gave rise to an arm extending into the pulmonary artery auricled and bifurcated. A yellowish formation was observed in the aorta, presented in lines. The attachments of the curved borders of the semilunar valves were hardened. Weighed 9 oz. 4 dr.

LUNGS.—Left lung generally of a dark red color. Many lobules on the posterior surface were nearly black. The lighter colored lobules on posterior surface were elevated and enlarged. Lung substance was full of blood. On section the posterior portions presented in regions a bruised appearance. This was seen especially above the border of the consolidated lobules. Bronchial tubes of this lung were slightly reddened; the bronchial glands were nearly black. The posterior portion of right lung was more generally dark colored than that of left. Section in it revealed a number of light colored purulent spots, found on examination to be composed of tissue having greater specific gravity than water, and finely granular when observed closely. The whole of this lung was full of blood. Left weighed 1 lb. 9 oz.; right weighed 1 lb. 4. oz.

LIVER normal in consistence, of a bright reddish brown color, quite full of blood; having deep black congestion superficially, inferiorly and anteriorly. Weighed 4 lbs.

SPLEEN of triangular shape, small, firm; light colored externally, darker internally. Weighed 6 oz.

KIDNEYS flaccid. Light colored spots were observed under capsules of both. Supra-renal capsules were normal. Kidneys weighed 5 oz. each.

INTESTINES.—Omentum was found thickened and adherent to intestines. Mucous surface of large intestines generally of an ash color, presenting regional hyperæmia and exhibiting in sigmoid flexure minute granules of lymph firmly attached to a congested, transversely broken base. Deep congestion of the fundus of the stomach and of the mucous tissue of nearly the whole organ, except what borders the orifices. Duodenum and uppermost part of jejunum was of an ash color, flabby and hyperæmic. The latter characteristic was marked just above a portion in which deep transverse ulcers were observed, in the course of and between the valvulæ conniventes, generally affecting the mucous and muscular coats and associated with inflammation of all the coats, (as evidenced by peritoneal opacity and adhesions). The granulating surfaces were covered with a greenish yellow fibrin. Although generally between the valvulæ conniventes, these ulcers extended over them frequently and also frequently through them, so as to form islands of mucous tissue. Lower down the jejunum became changed to the feel, being firm and elastic; it was also easily torn. In the lowermost part deep oval ulcers were seen, extending through the mucous and muscular coats, giving the organ a honey-combed appearance. Long flakes of tough greenish-yellow substance were found in the ulcerated portions. No flakes of lymph were seen in the sac of the peritoneum, but the opposed surfaces were generally agglutinated.

GALL BLADDER was filled with black bile. Weighed $4\frac{1}{2}$ oz.

[CASE NO. 5.]

ELI SATTERFIELD, private Co. F, 12th W. Va. Inf.; age, 40. Admitted July 24th, 1865, from Jarvis, U. S. A. General Hospital, Baltimore, Md.

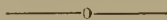
HISTORY.—(ANTE MORTEM.)

Patient was suffering from a gunshot wound of left elbow, opening joint, received April 2d, 1865, near Petersburg, Va.

July 31st.—Circular amputation of left arm, at junction of middle and upper third, was performed; oval skin flap and circular muscular incision. Ether used. Seven ligatures applied. Patient reacted slowly. There was great bleeding during the operation. Parts much swollen; erysipelatous and infiltrated extensively with pus at the time of operation. Patient was much weakened by drain upon system. Secondary hæmorrhage took place August 6th; eight to ten ounces of blood lost; artery ligated in the stump.

Died August 6th, 1865, of pyæmia. Treatment, simple dressings.

Operation performed by Surgeon H. L. W. Burritt, U. S. V. Artery ligated by A. A. Surgeon B. B. Miles, U. S. A.



POST MORTEM,

BRAIN surface exsanguine; organ flabby. A quantity of limpid serum in lateral ventricles. Weighed 3 lbs. 2 oz.

LUNGS.—Right lung flaccid, speckled with melanic matter. Tissues of posterior portion were tough, of an ash color and regionally congested. The posterior portion of the left lung presented numerous small masses of a light yellow color, yielding on section a viscid yellowish-white puriform substance, in some cases only on pressure. This lung was flaccid and speckled as the right and had a doughy feel. Right lung weighed 2 lbs.; left weighed 1 lb. 10 oz.

HEART large, flaccid, tinged red, having on the right side a large white clot, attached in the usual manner, and on the left a large black clot, of mixed character, in the auricle. The attachments of the semilunar valves of the aorta were hardened. Weighed 1 lb., clots included.

LIVER of large size, mottled externally, the mottlings varying from a dark red to a light yellow, with an ash tint on the left. The organ was of soft consistence, had an unpleasant odor, and presented superficially and anteriorly a dark congestion. Weighed 7 lbs. 1 oz.

SPLEEN large, flabby, of a light color and very soft.

PANCREAS weighed 3 oz.

KIDNEYS both conspicuously mottled, especially the right; very flabby; light colored on section. Right weighed 7 oz.; left weighed 8 oz.

INTESTINES.—Stomach of large size, mottled in the fundus. The upper part of jejunum was tinged grayish or greenish yellow, mottled red or pink, and speckled finely by some black substance, and was regionally hyperæmic (for about four feet). The remaining portion was of an ash color. Ileum was ironed and thin in upper portion; arborescent congestion presented in its lower part. Large intestine of a dark color in cæcum and ascending colon; hyperæmia in transverse colon, sigmoid flexure and rectum.

[CASE No. 6.]

CHARLES ALLEN, private Co. M, 2d Conn. H. A.; age, 25. Admitted July 24th, 1865; died August 8th, 1865.

HISTORY.—(ANTE MORTEM.)

This man, at the time of admission, was too feeble to give any extensive account of himself, being [at the same time] very much emaciated and scarcely able to raise himself in bed.

He has a wound on the external side of the left thigh, about four inches below the trochanter, which is nearly healed and does not discharge. Another opening exists about the middle of the left gluteus maximus that discharges copiously sero-purulent and excessively fetid matter.

July 25th.—Was ordered iron, with wine.

July 30th.—Patient constantly failing; the excessive discharge from the wound exhausts his strength rapidly. Feet and ankles are much swollen.

August 3d.—Diarrhœa set in yesterday and passages are quite frequent. Patient is too weak to speak aloud; complains of dryness and soreness of the throat. He is unable to turn in the bed. Wound still discharges. The use of iron was discontinued. Prepared chalk and catechu were administered.

August 8th, at 5 P. M., he died.

Case reported by

GEO. W. FAY,

A. A. Surgeon U. S. A.

—o—

POST MORTEM,

Great emaciation. No post-mortem rigidity. Large bed-sores on left hip and sacrum. Some sugillation. A discolored cicatrix on thigh marked entrance of the ball.

BRAIN.—Vessels of pia mater moderately full. On anterior portion of right hemisphere there was a purple spot (of ecchymosis) of more than an inch square area, section through which into brain substance exhibited a triangular outline of a

mass of dark cherry-red tissue, apparently the result of capillary ecchymosis into the grey and white tissues. Deeper than this puncta were numerous and conspicuous. A large vessel of the pia mater traversed the surface of the area formerly mentioned, that was occupied for a distance of four inches by a thrombus of mixed character, partly firm and white, partly pulsatious and flaky, and partly, posteriorly especially, black or dark red and firm. A branch of this vessel ran across the area referred to. This also was filled with a thrombus and had a hard wiry feel before section, and after section was found occupied with a firm white clot; this latter adhered closely to the lining membrane leaving a central sac or passage. Nearer the vertex, where Pacchionian bodies are presented anteriorly, there was a congeries of large vessels of the pia mater filled with clot. Arachnoid not opacified; the pia mater was easily detached from the brain surfaces. In a location upon left hemisphere, corresponding with that of the ecchymosis area formerly described, (symmetrical with it,) there was a yellowish area. A small vessel, similar to the one traversing the former, occupied by a clot, traversed the yellowish area. Brain otherwise apparently normal. Weighed 2 lbs. 15 oz.

LUNGS.—Lower lobe of right lung discolored; marked by distended erepitant lobules posteriorly superiorly and internally, and doughy in posterior, inferior and lateral regions. The whole lobe was tumid. From a section posteriorly frothy liquid was expressed readily and abundantly. The two upper lobes were normal. Old adhesions presented by surface of lower lobe of left lung. Tissue in relation with them was ear-nified. Left lung otherwise normal. A small quantity of liquid was found in the pleural sac of the right side, none in that of the left. Right lung weighed 11 oz. 2 dr.; left 15 oz. 4 dr.

HEART.—Large black clot in right side; a similar clot observed in the left. Organ tough and flexible; substance rather pale. Weighed 9 oz.

LIVER of a leaden color superficially, reddish and finely mottled on section. Weighed 3 lbs. 7 oz. 4 dr.

PANCREAS flabby and discolored. Weighed 1 oz. 4 dr.

SPLEEN somewhat enlarged, of dark color, especially inferiorly, and of normal consistence. Weighed 8 oz. 4 dr.

KIDNEYS irregularly ingested. Right weighed 3 oz.; left 4 oz.

SUPRA-RENAL CAPSULES normal.

INTESTINES.—Duodenum and upper part of the jejunum discolored. Intestines thinned and in regions markedly hyperæmic. Small ulcers found in cæcum. In ascending colon ulcerative disease was confined principally to the regions of the longitudinal bands. In the transverse colon the intestine was thickened and whitened internally. This general internal whitening was variegated with black bands in the region of the longitudinal bands, and black, dark, opalescent specks where there were colic glands. The disease appeared limited to the mucous membrane, which was much thickened, as was apparent on section. Below this the blackness ceased and a few irregular ulcers were met with. In the lower part of the sigmoid flexure there was hyperæmia. A few superficial ulcers were observed there.

WOUND.—Ball entered near the outer border of left sartorius muscle, about the junction of the uppermost with the second fourth of the thigh, passing inwards, backwards and upwards, striking the femur below the trochanter major, in the upper portion of the diaphysis, passing out to the left of the tuberosity of the ischium.

RESULT.—The formation of an involucrum of the diaphysis. The involucre was formed of course by an ossous deposit, by agency of the periosteum which gained in size as well as density becoming in places from three-fourths of an inch to an inch in thickness. Fenestra afforded means of connection between the involucrum and the sinuses of abscesses in the lower and upper portions of the thigh. In the latter portion the hip-joint was involved.

[CASE No. 7.]

O. G. ПОКИРК, private Co. A, 46th N. Y. Vols.; age, 26. Wounded September 29th, 1864; died August 14th, 1865.

HISTORY.—(ANTE MORTEM.)

I took charge of this patient July 28th, 1865, and found him suffering with a gun-shot wound of the upper third of left leg, with comminuted fracture of tibia and fibula. The leg was very much swollen, inflamed, and seemed to have assumed something of the nature of elephantiasis. There was marked deformity of limb, the upper third being nearly three times the natural size, as was also the ankle. The first and second thirds (of thigh) about twice the natural size. There was great induration, thickening and roughness of the dermis, and a general sensitiveness (hyperæsthesia?) from the knee downwards. From appearances there seemed to be complete hypertrophy of all the tissues. There was also characteristic erysipelatous inflammation of the thigh. The general condition of the patient, at the time of my taking charge of him, and appetite particularly were tolerable good. As he had, according to statement, been using for some time an application of lead and opium to the limb it was determined to try instead a solution of iodide of potassium and opium to the leg and an oleaginous preparation to the thigh; latter composed of olive oil, tincture of opium, and acetate of lead. The whole limb was enveloped in oiled silk. Whiskey, porter and syrup of the iodide of iron, in continuation with other tonics, were also prescribed. The leg was continued placed in a box splint as it had been for some time. Under this treatment a considerable diminution in the swelling was observed in about a week.

On the seventh of August the external side of ankle was found becoming gangrenous. A solution of permanganate of potassa was applied. For three days, up to the day before his death, a gradual diminution of strength occurred together with considerable gastric trouble and diarrhœa. On the twelfth the diarrhœa commenced to check but the gastric trouble continued, the patient vomiting nearly everything he ate. This trouble however gradually subsided the next day. His strength in the meantime seemed to be gradually giving away.

His stomach being now quieted beef essence and carbonate of ammonia, with frequent doses of whiskey, were given up to the time of his death.

Case reported by

T. H. STUDDIFORD,

—————o————— A. A. Surg. U. S. A.

POST MORTEM,

About thirty-six hours after death.

To preserve the body for transmission to friends it had been injected with solution of ehloride of zine and at first it seemed as if we could make no post-mortem examination. Finally an examination was hastily made and the following notes taken.

Body greatly emaciated. Rigidity great. The muscles of the left leg were markedly atrophied and of a faint reddish color. Fat deposits enormously increased, chiefly in the superficial faseia. A large abscess was observed in the upper part of the left thigh. So far as the great organs were seen they were apparently normal except that hypostasis and lobular consolidations were observed in posterior parts of lung, (right).

Liver weighed 3 lbs. 2. oz. 4 dr. Left lung 1 lb. 1 oz.; right, 1 lb. 12 oz. Heart, 8 oz. Spleen, 3 oz.

[CASE No. 8.]

HENRY LEWIS, corporal Co. F, 38th U. S. C. T.; age unknown, (young?) Admitted July 24th, 1865; died August 11th, 1865.

HISTORY.—(ANTE MORTEM.)

The patient, a mulatto, suffered from phthisis July 24th, 1865, cough, diarrhœa and dispnœa. Pulse weak, appetite poor; much emaciation; ulcers around the neck. Treatment, gave astringents, tonics, brandy, animal diet. Simple dressings to ulcers.

July 30th.—Much better, able to walk about; diarrhœa checked somewhat. The lungs examined, “cracked pot” sound in superior portion of both lungs with dullness below. Metallic sound (tinkling?) in upper portion of both lungs. Rale (respiration?) cavernous on superior portion of right lung, less so on the left. Heart displaced to the right side.

DIAGNOSIS.—Phthisis Pulmonalis and Scrofula; both lungs cavernous. The mesenteric and glands of the neck affected.

August 3d.—Treatment continued with addition of cod liver oil.

August 6th.—Nausea; oil discontinued, opiates at bed-time—a sudden change in the atmosphere.

August 7th.—Is again prostrated, great dyspnœa and cough. Gave expectorants.

August 10th.—Patient sinking rapidly. Only stimulants and opiates were ordered.

August 11th.—Died 8 o'clock, A. M.

Case reported by

R. M. KIRK,

A. A. Surg. U. S. A.

POST MORTEM,

BODY.—Extreme emaciation. Serofulous sores on both sides of the neck, especially on the right.

BRAIN flabby, substance somewhat softened. Corpus callosum very soft, so also the fornix. Third ventricle filled with serum. A quantity of serum was found in the lateral ventricles. A species of softening on floor of fourth ventricle. Numerous lines of congestion above the origin of the auditory nerves, especially on the right side. Ventricles of cerebellum more capacious than usual. Weighed 3 lbs.

LUNGS.—Old adhesions and strong ones in both pleural sacs. Right lung full of miliary tubercles. Two large vomiceæ found in uppermost lobe, outer and posterior portions. Left lung full of miliary tubercles; large vomiceæ found in central portion of upper lobe. Right weighed 1 lb. 12 oz.; left, 1 lb. 4 oz.

HEART.—Sac of pericardium obliterated, but the opposed surfaces of it still movable. Numerous tubercular patches were observed. Heart substance pale, of a light brown color. White clot of large size in the right side; black clot in left ventricle and connected with this a white aortic thromb. Weighed 12 oz.

LIVER of very dark color superficially, having a heavy odor and dark red substance on section; normal consistence, presenting tubercles superficially. Weighed 3 lbs.

PANCREAS large and tough. Weighed 2 oz. 4 dr.

SPLEEN of small size, flexible, tough and containing tubercles. Weighed 4 oz. 4 dr.

KIDNEYS.—Right of somewhat light color; capsules readily detached. Left similar, of a darker color. Right weighed 4 oz. 4 dr.; left, 5 oz.

INTESTINES.—Tuberculous ulcerations in the lower part of ileum. Minute blood spots upon the free borders of the valvulae conniventes, in regions, giving the regions a finely speckled and streaked appearance.

Bile of light yellow color. Urinary bladder distended with urine.

[CASE NO. 9.]

LEONARD BENNETT, private Co. D, 199th Pa. Vols. Admitted June 30th, 1865; died August 15th, 1865.

HISTORY.—(ANTE MORTEM.)

The patient was of bilious temperament and when admitted was suffering with intermittent fever. There was great emaciation, a yellow tinge of conjunctivæ and skin. The pulse was about seventy. Tongue moist, slightly furred; appetite deficient; occasional vomiting presented; looseness of bowels, five or six passages daily; wakefulness, restlessness. Body was often cold, the circulation was very feeble. Treatment supporting and stimulating.

Memorandum report based upon that of Act. Asst. Surgeon J. Bolton, U. S. A.

 POST MORTEM.

About twenty-four hours after death.

Body emaciated, rigid.

BRAIN.—Left hemisphere longer, right broader. Generally normal. Weighed 3 lbs. 4 oz.

LUNGS —Intense central and posterior congestion of the right lung, posterior of left. Right weighed 1 lb. 3 oz.; left, 1 lb.

HEART normal; weighed 8 oz.

LIVER of light color superficially, blackened anteriorly and inferiorly; yellow granular bile. Weighed 3 lbs.

SPLEEN of normal size, firm. Weighed 8 oz.

PANCREAS normal; weighed 1 oz. 4 dr.

KIDNEYS large with light colored substance; well marked exhibition of tubular portions. Right weighed 9 oz.; left, 8 oz.

STOMACH enlarged; blood spots in mucous membrane. Small

intestines generally discolored and very offensive; jejunum black or dark purple. Cherry color in the upper part of the ileum, darker below.

*Case 10
201
21/2/1865*

[CASE No. 10.]

RUBEN COLLINS, private Co. E, 38th, U. S. C. T. Admitted July 24th, 1865; died August 15th, 1865.

HISTORY.—(ANTE MORTEM.)

Memorandum based upon that of Act. Asst. Surgeon A. McLetchie, U. S. A.

Patient was young, feeble, emaciated, mentally imbecile, incapable of answering questions. He suffered with great tenderness over the abdomen, increased on pressure. Soon he had involuntary evacuations, became still more perfectly helpless and rapidly sank.

—o—

POST MORTEM.

Six hours after death.

BRAIN.—A quantity of reddish fluid found in the left ventricle. In the left choroid plexus, about one inch from the foramen of Munro, a mass of white granular caseous material resembling tubercle was found. The veins of the pia mater were much enlarged on the left side. Substance of cerebellum very soft, that of cerebrum soft. Weighed 2 lbs. 10 oz.

LUNGS.—No vomicae in either lung. Right lung weighed 1 lb 5 oz.; left, 1 lb. 8 oz.

HEART.—The auricles were occupied by dense clots, A small white clot in right ventricle extended an arm into pulmonary artery. A similar clot in left ventricle extending into

the aorta. The organ itself was normal, sac of pericardium free. Bronchial glands were tumid and discolored.

LIVER.—The opposed surfaces of the sac of the peritoneum were strongly united over the surfaces of the liver, which was accordingly marked by adhesions that were plainly of long standing. The substance of the liver was dark red, almost homogeneous at first sight on section. Section disclosed however a large number of saccules, varying in size from that of a grape seed to that of a common bean, containing a greenish semifluid granular and granulated matter. The liver was of normal size. Its gall bladder was moderately filled with mobile amber colored bile. A single mass of tubercle was observed in the liver substance. Weighed 3 lbs. 2 oz.

SPLEEN was of dark color, firm consistence and natural size. It contained a large mass of tuberculous substance. Weighed 4 oz.

KIDNEYS.—Both exhibited tubercles. Right weighed 5 oz.; left, $4\frac{1}{2}$ oz.

INTESTINES.—Ulcers observed in sigmoid flexure and ascending colon, deep, irregular, isolated and not numerous. The omentum near the transverse colon was studded, thickened and stiffened with tubercle. A large ulcer was found in the ileum just above the caecal valve. Mucous membrane however was comparatively free from tuberculous matter, the formation of this being chiefly in the peritoneum. A single circular ulcer, with raised borders, sharp edges and so deep as to be torn through its fundus in extraction of the intestines, was met with in the upper part of the ileum. The surrounding mucous surface exhibited no other solutions of continuity. The intestinal walls were generally so thin and weak that they were easily torn through.

[CASE No. 11.]

HENRY BYER, private Co. K, 1st Md. Vols. Admitted July 26th, 1865, from Jarvis, U. S. A. General Hospital.

HISTORY.—(ANTE MORTEM.)

Henry Byer, a discharged soldier, was admitted, according to the ward register, with typhoid fever. I found him suffering from chronic diarrhœa. He was much emaciated, pulse feeble, often imperceptible, skin dry and hard, tongue very glassy, no appetite. Stools from one to three an hour, small and watery, often yellowish and again of darkish color. Treatment, wine, opium and camphor, subnitrate of bismuth, milk punch. Stools reduced to two or three in twenty-four hours. He finally refused to take any food, even milk, and died August 21st, 1865. About ten days before his death pus was observed in the anterior chamber of the right eye.

Case reported by

B. B. MILES,

A. A. Surg. U. S. A.

POST MORTEM,

Body emaciated, not rigid; six feet long. Sugillation.

BRAIN.—Pacchionian bodies numerous and distinct. Upper surface of cerebrum whitened. Pia mater congested. A quantity of reddish sub-arachnoid fluid in association with large vessels exhibited especially in vertex of left hemisphere posteriorly. Slight quantity of fluid in lateral and third ventricles. Floor of fourth ventricle discolored; presented prominent filaments of origin of auditory nerves. No commissura mollis. Weighed 3 lbs. 2 oz. 1 dr.

LUNGS.—Substance of left generally crepitant. In the anterior portion of the upper lobe there was a collection of consolidated lobules. The posterior portion of lower lobe was in a half consolidated condition, still faintly crepitant and moder-

ately tough, with ecchymoses. The pleural surface in relation with the consolidated substance was granulated and patched, the opposed parietal surface not being affected. The vessels of the diseased visceral surface were conspicuously developed. Specific gravity of this partially consolidated substance very little less than that of water. In the right lung the posterior part of upper lobe was pneumonified, in stage of gray hepatization. The substance of the lower lobe ingested. Right lung weighed 1 lb. 5 oz.; left, 1 lb. 2 oz.

HEART.—White clot in right side, black in left. Organ normal. Weighed 8 oz.

LIVER normal in size and consistence; full of blood; somewhat rank odor. Black discoloration superficially and anteriorly on inferior surface. Right lobe of light color. Weighed 3 lbs. 8 oz.

SPLEEN firm; dark color on section. Weighed 6 oz. 8 dr.

KIDNEYS.—Left large, rather soft; discolored inferiorly. Right similar. Both had a strong urinous smell. Right weighed 8 oz.; left, 6 oz.

PANCREAS small and tough. Weighed 1 oz.

SUPRA-RENAL CAPSULES small.

INTESTINES.—Large intestine thinned, discolored and hyperæmic, presenting regionally an intense showy purple mucous surface. Jejunum discolored with bile. Stomach large and much discolored. Yellowish bile, about three ounces.

[CASE NO. 12.]

JOHN BROOKS, private Co. A, 146th Ind. Vols. Admitted August 12th, 1865; died September 1st, 1865.

HISTORY.—(ANTE MORTEM.)

On his admission from the barracks [the man's company was doing guard duty for the Hospital] the patient complained of pain in the epigastric region. There was diarrhœa, occasional vomiting (the matter rejected being generally bilious) attended with increase of pain. Pulse 108 and full. Tongue coated in the centre. Alteratives, counter-irritants and anodynes were administered.

August 14th.—Patient improving. Some appetite; no vomiting.

August 16th.—Worse. Counter-irritants used again; stimulants given.

August 17th.—Very restless; complains of pain in the umbilical region, hiccough, vomiting of bilious matters. Latter symptoms allayed by treatment.

August 19th.—Mucilaginous drinks, stimulation (by brandy) increased. Diarrhœa increased, discharges bloody. Hiccough severe, yielding however to effervescing draughts with chloroform. Pulse small, skin clammy; perfectly rational. Thirst; great irritability of stomach, retains only the effervescing draughts and brandy.

August 22d.—Lead and opium given. Pulse 120. For the last twenty-four hours there has been severe hiccough, somewhat intermittent. Patient has eaten egg and retained it.

August 26th.—Diarrhœa (with bloody stools) not abated. Says he is better. No pain except on pressure; pulse very small and irregular.

August 28th.—Pulse 119. Skin is bedewed with cold sweat. Countenance pallid and anxious. Had a profuse hemorrhage from the bowels last night. Still rational.

August 30th.—Stimulants continued; Dover's powder given. Involuntary passages very copious. The patient is perfectly helpless and rapidly sinking from the drain on his system. Coma. Died September 1st, 1865.

Notes made from those of Aet. Asst. Surg. A. McLetchie,
U. S. A.

Decided counter-irritation was instituted and large doses of opium given with injections of astringents and styptics during the last ten days. The patient was a very powerful and well developed man. His stools towards the end were nearly black and very offensive.

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POST MORTEM,

Twenty hours after death.

Little emaciation or rigidity.

BRAIN.—Congestion of pia mater over the posterior portions of upper borders of cerebral hemispheres. Substance of the brain flaccid, apparently of normal consistence, with little or no serum in the ventricles. Weighed 2 lbs. 15 oz.; measured 7 inches.

HEART flabby. No organic disease observed. Weighed 9 oz. $5\frac{1}{2}$ dr.; measured $5\frac{1}{2}$ inches.

LIVER.—Numerous collections of yellowish-white substance in the average of the size of a pea observed. On the upper surface centrally there was blackening. Other portions of substance had a pinkish color. Slight odor. Weighed 4 lbs., measured $12\frac{1}{2}$ inches.

LUNGS.—Left normal. Black congestion in lowest lobe of right posteriorly. Right weighed 13 oz., measured $7\frac{1}{2}$ inches; left weighed 14 oz., measured $8\frac{1}{2}$ inches.

SPLEEN.—Very firm substance. Weighed 7 oz. 4 dr.; measured 5 inches.

KIDNEYS presented hypostasis with smell as of decomposition. Right weighed 5 oz. 4 dr., measured $3\frac{1}{2}$ inches; left weighed 7 oz. 4 dr., measured 5 inches.

PANCREAS discolored. Weighed 2 oz. 8 dr., measured 8 inches.

INTESTINES generally of an ash color externally. Peyer's patches presented the "shaved chin" appearance. There was

regional discoloration in the stomach. In the upper portion of the ileum pale or brownish granulations began to appear on valvulæ conniventes which there assumed a corded appearance. Spots of light color and firm feel, resembling superficial ulcers, were observed associated with Peyer's patches. The intestine was thickened where these were seen. Lower down the disease in Peyer's patches gave them a honey-comb appearance. At the termination of ileum there was a large collection of ulcers extending through the mucous membrane giving that portion a pitted honey-comb appearance. Numerous and deep ulcers observed in tract of large intestine, none of which had, however, resulted in perforation. The walls (with all the coats) of the intestine were so involved in the inflammatory disease as to be torn in pieces, and rendered nearly irreco gnizable in certain regions, in extraction. The remains of the mucous surface of the large intestine had a deep dark red or cherry color.

GALL BLADDER weighed 1 oz. 3 dr., measured 3 inches.

*Case 204
210 Vol*

[CASE No. 13.]

JOHN WHALEN, private Co. G, 3d N. Y. Vols.; age, 30. Admitted August 31st, 1865.

HISTORY.—(ANTE MORTEM.)

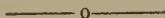
This man came under my care suffering with malignant dysentery. According to his statement he was taken ill while with his regiment on its way from Raleigh, N. C. to New-York. On its arrival in this city, which was about four days from the commencement of the attack, he was sent here. He had not during this time taken any remedies. On the day of his admission he had considerable symptomatic fever which subsided somewhat the day after, when his hands, feet and nearly the whole surface of his body began to assume a dry and cold feeling on touching. The tongue was thickly covered with a whitish brown fur; there were more or less dark brown

sordes on the teeth. The stools were watery, of a dark bloody color, emitting a highly offensive and sickening odor. The urine was scanty and of a deep color. There was severe tenesmus and on pressing the abdomen the patient complained of a great deal of pain. On the second, fourth and sixth night he was very delirious. He died the morning of September 6th.

In the treatment of this case castor oil and tincture of opium were first given. The stools becoming more bloody and copious tannic acid and opium were given internally and injections of ice-water after every stool. The patient was also requested to hold small lumps of ice in his mouth every now and then. Not improving under these means it was determined in consultation to give injections of acetate of lead, acetate of morphia and acetic acid in common starch solution. Stimulants were freely given.

Case reported by

T. H. STUDDIFORD,
A. A. Surg. U. S. A.



POST MORTEM.

Post-mortem rigidity very marked. Muscular system conspicuous.

BRAIN.—Pia mater injected. Pacchionian bodies conspicuous on the vertex anteriorly and posteriorly. Arachnoid opacified, especially over the sulci about the fissure of Sylvius and island of Reil. Pia mater and arachnoid readily detached. Substance of brain generally normal. Weighed 3 lbs. 1 oz., measured $8\frac{1}{2}$ inches.

LUNGS.—At the summit of upper lobe of left lung posterior aspect, several tuberculous masses of considerable size were observed in association with carnified pulmonary tissue. There were no vomicae nor did the tuberculous masses exhibit any signs of breaking down. In but one instance so far as seen was any puriform fluid to be expressed from them. Bronchial glands above the entrance of the pulmonary artery were enlarged, blackened and apparently tuberculous. The

carnified tissue was T shaped, the perpendicular arm of the T reaching toward the pulmonary artery and the horizontal arm occupying the upper and back part of the upper lobe of left lung. Pulmonary tissue discolored and marked with melanic matter. Pleuritic adhesions over the regions of carnification. Right lung adherent to diaphragm by old attachments. Also old pleuritic adhesions posteriorly. In the inferior portion of the lower lobe the tissue in relation with the diaphragmatic bands exhibited a tendency to carnification, being redder, tougher and less crepitant than the adjacent more healthy pulmonary tissue. Ecchymosed lobule observed in the lower lobe. Tuberculous nodules in extreme upper portion of right lung. Lung discolored, collapsed and dotted with melanic matter. Right weighed $12\frac{1}{2}$ oz., measured $9\frac{1}{2}$ inches; left weighed 14 oz., measured 9 inches.

LIVER.—Bands on peritoneal surface of capsule superiorly. Substance generally of light color on section. Right portion of right lobe conspicuously bloody. In the upper part of left lobe there were two depressions as of cicatrices. Left border was somewhat wavy in outline. The substance was generally of firm consistence and apparently high specific gravity; presented outlines of acini on a torn surface and yielded dark greenish viscid bile. Strong odor. Portions of substance very bloody and accordingly clearly exhibited on section were observed in the right of the organ. Liver weighed 5 lbs. 6 oz., measured 11 inches.

HEART.—Large white clot in right side; white clot in left side. Substance of organ firm and of a light color. Valves normal. Weighed, without clots, $10\frac{1}{2}$ oz., measured $5\frac{3}{4}$ inches.

SPLEEN.—Capsule of a light color, presented pits. Substance firm. Weighed 7 oz., measured $5\frac{3}{4}$ inches.

PANCREAS of large size, firm, yellow. Weighed $3\frac{1}{2}$ oz., measured 7 inches.

KIDNEYS.—Cortical portion light colored generally. A purplish color externally. Intercolumnar congestion. Right weighed 5 oz., measured 5 inches; left weighed 6 oz., measured $5\frac{1}{4}$ inches.

SUPRA-RENAL CAPSULES of large size.

INTESTINES.—Stomach congested scarlet and speckled in region of fundus. Duodenum ashy. Jejunum occupied by a

yellowish viscid gelatinous substance which became darker lower down. Lower part of jejunum and upper part of ileum dark purple; variegated discoloration of valvulæ conniventes. Intestine finely injected. Intense hyperæmia and blood color in ileum, a currant jelly look. This gave place to minute circular superficial ulcers the pits of which appeared to be covered with fine light grey granulations. These were observed at termination of ileum. The longitudinal bands of the large intestine were well developed and so contracted as to exhibit the usual pouchings of the large intestine conspicuously. Upon a base of dark purple or currant jelly color, points of which appeared through it at intervals in the ascending colon, there was a large surface of yellow granulations, which when stretched presented a honey-comb appearance, extending from the cæcum to the rectum. There was general thickening of the gut and flattening out in descending and left portion of the transverse colon. Numerous dark substances were met with in the rectum and lower part of descending colon, apparently clots of blood somewhat altered. The granulations exhibited a general greenish yellow hue.

[CASE No. 14.]

HENRY STEGMAN, private Co. C, 146th Ind.; age, 47; Admitted August 12th, 1865.

HISTORY.—(ANTE MORTEM.)

Nervous temperament. On admission his skin was hot and dry, tongue coated, pulse 120 and rather full. He suffered with headache. He had been sick for several weeks. Upon pressure there was pain over the liver and spleen. Abdomen tympanitic. No pain on pressure observed. No diarrhœa. Sudamina on abdomen and thorax, also an occasional rose spot. Dover's powders given.

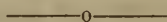
September 1st.—Pulse 120. Has a sharp and cutting pain in the left side. Friction sound anteriorly inferiorly. A blis-

ter applied. There is a large bed-sore. Quinine and whiskey.

September 4th.—Left side of the thorax evidently enlarged by a pleuritic effusion. Resonance of the right side greatly diminished.

September 6th.—Patient died.

Made from notes of Act. Asst. Surgeon J. Bolton, U. S. A.



POST MORTEM,

Fifteen hours after death.

Little rigidity.

BRAIN.—Injection of pia mater. Marked development of Pacchionian bodies. Membranes somewhat hard to detach from cerebral substance. Arachnoid somewhat opacified on the vertex. A quantity of limpid fluid was found in the lateral ventricles. Substance apparently of normal consistence. Fifth ventricle readily demonstrated and contained fluid. Weighed 3 lbs., measured 9 inches.

LUNGS.—A quantity of fluid was found in the left pleural sac; flakes of lymph adhered to the parietal and visceral pleuræ, especially over lower lobe of lung. This lymph was spread out and firmly attached, tough, elastic and apparently partly organized. Substance was generally collapsed and non-crepitant, was of dark color, did not break down under pressure, was flexible, of high specific gravity, sinking in water. A portion of the substance adjacent to that which sank in water and apparently of the same character was readily inflated. In the upper part of the lower lobe of the right lung under the pleura there was about a half an ounce of very dark mobile frothy fluid. This collection of fluid was not sharply defined and was loculated. A peculiar odor was perceived in it. Right lung generally crepitant; ingested, posterior inferior portions having a darker color. Bronchial glands slightly enlarged. Right lung weighed $15\frac{1}{2}$ oz., measured 9 inches; left weighed 1 lb. $5\frac{1}{2}$ oz., measured $8\frac{1}{2}$ inches.

HEART.—White clots on both sides. Atheromatous condition of semilunar valves of aorta, functionally of little moment. Weighed $7\frac{1}{2}$ oz., measured 4 inches.

LIVER.—Flaccid, generally of light color; some very dark spots (purple) on right lobe superiorly. Capsule was readily removed from over these spots, which were superficial and apparently the result of ecchymosis just beneath the capsule. Substance of normal consistence apparently. Acini indistinct. Weighed 3 lbs. 12 oz., measured $10\frac{1}{2}$ inches.

SPLEEN very flaccid, of light color, substance readily pulped. Weighed 9 oz., measured $6\frac{1}{2}$ inches.

PANCREAS flabby, pale, irregularly ingested. Weighed $2\frac{1}{2}$ oz.

The bile was a pale yellow mobile slightly viscid fluid.

KIDNEYS flaccid, irregularly ingested, purplish on section. both weighed $4\frac{1}{2}$ oz., measured $4\frac{1}{2}$ inches.

INTESTINES.—Cæcum and ascending colon colored yellow (bile tint); mucous membrane somewhat thinned in distension of the large intestine. Congestion in fundus of stomach. This organ very flaccid and much distended as were the small intestines. Throughout the small intestines there was yellowish discoloration by bile.

[CASE NO. 15.]

PATRICK HENNESEY, private Co. E, 1st Md. Inf.; age, 25. Admitted September 11th, 1865.

HISTORY.—(ANTE MORTEM.)

This man stated that he had been on a debauch for eight or ten days in which time he had not taken food of any kind. Pulse was very feeble and intermittent, countenance anxious, stomach irritable, rejecting everything taken. The administration of digitalis, brandy and morphia was attempted vainly. Beef tea was given per rectum.

September 12th he died.

Case reported by

B. B. MILES,

A. A. Surg. U. S. A.

POST MORTEM,

BRAIN.—Congestion of the pia mater and opacity of the arachnoid generally on the side and summit of the brain. At least two ounces of fluid found in sac of arachnoid. Anomalous distribution of left cerebral artery. Fluid found in lateral ventricles, more in the left, about two ounces in all. Weighed 3 lbs. 6 oz., measured 8 inches.

LUNGS.—Right lung crepitant except beneath the pleuritic bands on the sides and summit. Organ of very dark red, purplish, or black color. Non-crepitant substance had nearly the specific gravity of water. A few pleuritic bands observed on posterior portion of left lung, under which, however, lung substance was found to be crepitant. Lung dark red, very full of blood. Beneath the pleura anteriorly and internally in the surface of the upper lobe a minute body was found, black outside pearl colored envelope surrounding a gritty core. Under the microscope observation led to the conclusion that it was the remains of a mass of tubercle. Right weighed 2 lbs., measured 10 inches; left weighed 1 lb. 15 oz., measured 9½ inches.

HEART was covered with fat; flaccid, pale internally, presenting a white clot on the right side attached in the usual manner. Auricular septum perforate. A small white clot was found in the left ventricle. Weighed 14 oz., measured 6 inches.

LIVER.—Large, somewhat pale superficially, blackened inferiorly and anteriorly, flaccid; substance soft, of an ashy red color. Bile of a pale amber color and very fluid. Weighed 5 lbs., measured 11¾ inches.

SPLEEN enlarged; capsule readily detached. Substance very dark red and easily pulped. Weighed 10 oz., measured 5½ inches.

PANCREAS discolored. Weighed 3 oz., measured $11\frac{1}{2}$ inches (?)

KIDNEYS.—Hypostasis in both. Left paler than right. Right weighed 6 oz., measured $4\frac{1}{2}$ inches; left weighed $6\frac{1}{2}$ oz., measured $4\frac{1}{2}$ inches.

SUPRA-RENAL CAPSULES flaccid and torn in extraction. Not easily crushed.

INTESTINES.—Large intestine distended, flaccid, of greenish yellow color internally, presenting regionally hyperæmia. Bile discoloration and hyperæmia in termination of ileum. Deeper brownish discoloration higher up, which gradually assumed a lighter color again to become darker and again lighter and so on. Peyer's patches were met with unusually high up. Near their uppermost location brownish discoloration was presented on the free borders of the valvulæ conniventes which became fresher higher up and of a brighter bile tint. Hyperæmia of upper part of jejunum and duodenum. Stomach very much enlarged, flaccid, of dark reddish ashen color near pylorus, and diffused red in fundus with mottling of darker spots.

[CASE No. 16.]

WILLIAM SIBLEY, private Co. A, 2d Mass. H. A.; age, 25. Admitted September 10th, 1865; died September 11th, 1865.

HISTORY.—(ANTE MORTEM.)

This man states that he has been sick for a long time with fever and diarrhœa. He has lost his strength and flesh. He was delirious on the evening of the tenth and during the following day. The temperature of body very much increased; tongue dry and coated, pulse intermittent and very feeble. He died on the evening of the eleventh.

Treatment, brandy with carbonate of ammonia every two

hours, also solution of the citrate of ammonia. Cold applications to the head.

Case reported by

B. B. MILES.

A. A. Surg. U. S. A.



POST MORTEM.

Ten hours after death.

Rigidity. No emaciation.

BRAIN.—Congestion of the pia mater. Two ounces of fluid came from the sac of the arachnoid. An ecchymosis was observed anteriorly in upper part of right hemisphere and a similar spot more anteriorly over left hemisphere, both ecchymoses located beneath the arachnoid. Pacchionian bodies well marked. Ecchymoses were observed on the very vertex of the right hemisphere. About the Pacchionian bodies the membranes presented a granulated, banded, inflamed appearance, and in this region there was a decided opacity of the arachnoid. Small quantity of fluid was found in both lateral ventricles. Corpus callosum soft. Lining membrane of ventricles (ependyma) dull. On floor of fourth ventricle, about half an inch above the origin of the auditory nerves to the right of median line, an irregular ecchymoses was seen, two lines by half a line. Symmetrical lines of congestion, consisting of central and lateral congeries, were observed below this. Numerous puncta upon cut surfaces of brain. The latter reddened on exposure. Consistence generally normal. Weighed 3 lbs. 7 oz. 2 dr.

LUNGS.—Left lung generally of large size and very full of blood, presenting ecchymoses between lobes anteriorly and a greatly congested lower lobe, a large portion of lower anterior portion of this being in the first stage of pneumonia. The substance pneumonified was very red, somewhat tough and yielding, and breaking up (crumbling as it were) with little difficulty under pressure. On close inspection of cut surface a finely granulated appearance was observed. A great deal of

blood came from this lung during examination. Right lung was loaded with blood, especially posteriorly, and about root of lung there were ecchymoses. Some black discoloration in posterior portion of lowest lobe. Substance crepitant throughout. Right weighed 1 lb. 6 oz., measured $10\frac{1}{2}$ inches; left weighed 2 lbs., measured $10\frac{1}{2}$ inches.

HEART.—Large, bloody, fat externally; mixed clot in right side. Perforate auricular septum. Valves well developed. Left ventricle contained a very little fluid blood. Weighed 12 oz., measured 5 inches.

LIVER dark colored, had a rank odor. Substance firm and of high specific gravity. Bile small in quantity, brownish and very fluid. Weighed 3 lbs. $10\frac{1}{4}$ oz., measured $11\frac{1}{2}$ inches.

SPLEEN lead colored, flaccid; lead colored on section; substance very readily broken down. Weighed 6 oz., measured 5 inches.

PANCREAS large, firm and bloody. Weighed $2\frac{1}{8}$ oz., measured 4 inches.

KIDNEYS large, flaccid; fatty pelvis. Right weighed $6\frac{1}{2}$ oz., measured 5 inches; left weighed $5\frac{3}{4}$ oz., measured $5\frac{1}{2}$ inches.

SUPRA-RENAL CAPSULES very small—but one found.

INTESTINES.—Large intestine flaccid, regionally discolored, otherwise normal. Solitary glands prominent in ileum, which was aborescently congested regionally. Peyer's patches raised and blood specked. Upper part of intestine thinned with greyish and yellowish green discoloration. Bilious discoloration of greenish and brownish hue in upper part of jejunum. Leadен discoloration near pylorus; fundus mottled. Stomach generally flaccid, thin and greatly discolored.

[CASE NO. 17.]

OTTO ZIEGERA, private Co. G, 1st U. S. V. V.; age, 25. Admitted September 13th, 1865; died September 19th, 1865.

HISTORY.—(ANTE MORTEM.)

He stated that he had had an attack of remittent fever previous to admission. Countenance was anxious, pulse intermittent, skin natural temperature, perspiring freely, appetite poor, tongue furred, headache. He received stimulants and the best diet. For the next four days he improved, left his bed and was walking about. The day before his death he was said to have had a convulsion which was extremely violent so as to cause him to throw himself out of bed. This attack I considered a congestive chill. Next morning I found him collapsed, pulse almost imperceptible, body covered with a profuse cold perspiration. During the day he rallied. In the morning, while in the act of turning in bed, he was attacked with another convulsion, which was so violent as to cause him to throw his head violently against the wall and expire in an hour.

The patient had warmth applied to whole surface of body, and received brandy, carbonate of ammonia and sulphate of quinia. Previous to his death he had been eating watermelon and boiled eggs.

Case reported by

B. B. MILES,

A. A. Surg. U. S. A.

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POST MORTEM,

Eight hours after death.

Rigidity well marked.

BRAIN —Arachnoid opacified. Numerous white spots of small size were observed, chiefly on the right side over sulci. Pacchionian bodies not numerous but well marked. Numer-

ous puncta. Little fluid in the lateral ventricles. Opacity of the so-called lining membrane. On the floor of the fourth ventricle, above the origin of the auditory nerves, there were three regions of congestion, central and lateral, central on right of the median line. That on right side was greater and consisted essentially of three lines with a terminal ecchymosis. On left side the region was higher, also associated with ecchymosis. On pressure the blood would disappear from part pressed to return again on removal of pressure. Lateral spots of a bright scarlet color. The right region was about one line in width and five lines in length. Spots of ecchymosis on left which was less wide and three to four lines long. Pia mater congested. Membranes easily removed from convolutions. Substance of normal consistence. No fluid in sac of arachnoid. Weighed 3 lbs, $4\frac{1}{2}$ oz., length $9\frac{1}{2}$ inches.

LUNGS.—Right lung was of a dark color, less crepitant in lower lobe, marked with melanic matter (round or oval, one or two lines in diameter), somewhat puckered at the summit. A portion of the tissue was carnified. No evidences of tubercle. Between the lobes sub-pleural effusion was seen. Hypostasis inferiorly posteriorly. A great deal of fluid in pleural sac. Left lung conspicuously marked with melanic matter in large spots and the substance (foreign) of these could be felt by passing the finger over the pleura covering them. At the summit of the left lung there was a puckered appearance and a cuirassed feel. Substance presenting these phenomena was tough, inelastic and of the same specific gravity as water. Remaining lung substance crepitant. Right lung weighed 1 lb. 7 oz., measured $8\frac{1}{2}$ inches; left weighed 1 lb., measured 8 inches.

HEART fat externally, especially on the right side. Right ventricle was occupied by a loose ill-formed black clot and was very capacious. Black clot in both auricles. Valves normal; tissue of organ quite full of blood. Heart weighed 12 oz., measured 5 inches.

LIVER of red color externally, deep red internally; consistence and specific gravity normal. Band on middle of left lobe superiorly. Black discoloration inferiorly and puckered about gall bladder, which was small and much thickened. Gall stone: biliverdine present in excess.

SPLEEN enlarged, flaccid, presenting white depression anteriorly. Substance very soft. Weighed 15 oz.

PANCREAS of large size.

KIDNEYS AND SUPRA-RENAL CAPSULES normal.

INTESTINES large. Blackish color internally not associated with softening, ulceration or any appreciable lesion. Ileum and lower portion of jejunum colored yellow with bile. Upper part of jejunum of pale cream color. Stomach large, of light yellow color internally.

Muscular development good. Height $5\frac{1}{2}$ feet.

[CASE No. 18.]

JOHN FERRISON, private Co. I, 16th Wis.; age, 24; born in Germany. Died December 13th, 1865.

HISTORY.—(ANTE MORTEM.)

The patient was admitted July 24th, 1865, from "Jarvis" General Hospital. From the history of his disease, given by the man, it appeared that it had first commenced with pain in region of left hip joint, shooting down the thigh to knee; increased by pressure about the joint or by jerking the head of the femur up against the acetabulum. The patient thought the disease the result of cold. On admission there was pain in left hip, flattening of nates upon affected side, decided prominence of trochanter, thigh slightly flexed and adducted.

About November 20th, fluctuation having been discovered a little above and in front of trochanter major, an incision was made at this point and a small quantity of puriform fluid gushed forth followed by a large quantity of yellow inspissated pus of a cheesy consistence. After this the discharge became very profuse and fetid; hectic fever set in and the patient rapidly sank.

When I took charge of ward 13 the patient was exceedingly prostrated, very nervous, sallow and emaciated, with a weak

and rapid pulse; he suffered great pain from a large bed-sore over the right trochanter.

November 30th,--The matter exhibiting a tendency to bulge lower down in the buttock and to dissect its way down the thigh, a large counter opening was made below and posterior to the trochanter major. This opening discharged continually a large quantity of puriform fluid of an exceedingly fetid odor, containing small specks of necrosed bone, and toward the last a quantity of dark clotted blood. An abscess which had formed in the left groin immediately below Poupart's ligament was also opened and a large quantity of badly elaborated pus discharged. The patient became still more emaciated, was continually bathed in perspiration of a rank odor. Extremities became œdematous; breathing oppressed, thirst intolerable. He was seized with a severe chill on the evening of December 11th, succeeded by another on the following morning, and died at 3 A. M. December 13th, 1865.

Treatment consisted at first of ammonio-citrate of iron with potassii iodidum, cod-liver oil, together with alcoholic stimulants and good nourishing diet

December 4th.--Sulphate of Soda was administered in 20 gr. doses every two hours with ammonia and brandy.

A microscopic examination of the blood during life revealed a large proportional increase of colorless corpuscles in blood, supposed to be about one in ten. The red corpuscles showed no disposition to a nummular arrangement.

Case reported by

H. McELDERRY,

A. A. Surg. U. S. A.

POST MORTEM,

Fourteen hours after death.

BRAIN.—Two ounces of fluid found in sac of arachnoid. Pia mater ingested. Bloody fluid found in small quantity in lateral ventricles, also third. The velum interpositum was reduced to its great vessels. Lines of congestion on floor of fourth ventricle, chiefly on left side near the opening of cerebellar ventricles. To the left of the vermis superiorly there was an engorged vessel in which the blood had clotted and yielded its coloring matter to adjacent tissues. Brain of normal consistence. Weighed 2 lbs. 13 oz., length $7\frac{1}{2}$ inches.

LUNGS.—The outlines of pulmonary lobules in posterior portion of lower lobe of left lung were very distinct by reason of the formation of melanic matter over the interlobular spaces. An elastic blackish hematoid substance, about the size of a pea, was observed on the lateral surface of this lobe, which was preserved for further examination. It was situated just beneath the pleura; and in an interlobular sulcus another similar body was observed that presented many points of resemblance to an altered blood clot. The upper lobe was of a lighter color, changing from a light yellow to a bluish white and a dark purple. On the posterior portion of the superior surface of the lower lobe there was a thick close well organized old adhesion band, in relation with which, in the superior lobe, there was a vomica an inch in diameter, containing a yellow caseous and somewhat granular material, and thick walled. Calcareous masses of small size were met with in the border of the upper lobe. Dark brownish gelatinous plugs found in the bronchial tubes of the third magnitude. Right lung reddish posteriorly and greyish anteriorly. Tissue crepitant, presented sub-pleural black substance having an appearance similar to that of the foreign bodies found in left lung. Pulmonary tissue generally flaccid. Right weighed 1 lb. $3\frac{1}{2}$ oz., left 1 lb. 6 oz.; measurement of both 9 inches.

HEART.—Auricular septum imperforate; tracts of vessels marked with fat. Substance of heart pale. Organ weighed

LIVER.—Much enlarged, of a scarlet color mottled with minute yellow spots on superior surface. Substance had a yellow look on section. Bile was observed on section of bile tubes. Bile limpid, mixed also with brownish matter, and very viscid. About two ounces present in the gall bladder. Weighed 5 lbs. 5 oz., measured 12 inches.

KIDNEYS of large size and light color, presenting intercolumnar congestion and excess of pelvic fat. A gristly white substance was found in one of the pyramids of the left kidney. Right weighed $6\frac{1}{2}$ oz., left $7\frac{1}{4}$ oz., both measured 5 inches.

SUPRA-RENAL CAPSULES.—Right of large size, readily torn. A hard yellowish white homogeneous substance was found in left supra-renal capsule.

SPLEEN flaccid; substance somewhat tough. Weighed 8 oz., measured 5 inches.

INTESTINES.—Solitary glands of small intestines conspicuously developed; thickening of mucous membrane, regional hyperæmia of jejunum and ileum. In smaller curvature of stomach two deep ulcers were observed, one oval the other round. Anteriorly near the cardiac orifice there was another round ulcer. Stomach preserved.

Sugillations in different portions of the body. The left innominate bone was generally necrosed. Abscesses were found beneath the pelvic fascia, under the iliac and psoas muscles, and about the rotators and adductors of the thigh, commencing with points of dead bone and diseased periosteum such as the head of the femur, the ilium and the pubis presented. Edema in both feet. Openings for abscesses of left hip artificial and natural. Bed-sores over trochanter major.

[CASE No. 19.]

JOHN LODO, private Co. F, 5th U. S. C. T.; age, 18. Admitted July 24th, 1865, from "McKims" General Hospital.

HISTORY.—(ANTE MORTEM.)

When admitted patient was suffering with gunshot wound of left thigh. The ball, a minie, having entered on the outer side of the limb at the junction of the middle with the upper third, passing upwards backwards and inwards, fractured the bone and lodged. The wound was received at Wilmington, N. C., March 9th, 1865.

Until the first part of October the patient's general health was good but his limb was œdematous, especially in the thigh. the tissues of which were much thickened and indurated. There was an indolent ulcer upon the dorsum of the foot caused by pressure from an anterior splint which had been applied to the limb. Towards the last of September the ball was discovered, by a Nelatons probe, deeply imbedded in the bone. The callus seemed to have grown up around it completely enclosing it. It was accordingly found impossible to remove the ball without cutting away a portion of the callus, which was accordingly done and the ball readily extracted.* Several small pieces of necrosed bone were also taken away at the same time.

About the middle of October, when I took charge of him, the patient seemed improved in health although the limb still remained œdematous and the wound discharged considerably, the matter seeming to have a tendency to dissect its way under the fascia lata. The ulcer of the dorsum of the foot was slowly granulating up. Two bed-sores over the sacrum caused the patient considerable annoyance.

Under careful bandaging the œdema of the limb subsided and ultimately passed away. The ulcer on the foot healed and the bed-sores slowly cicatrized over; at the same time his general condition improved under a good nourishing diet, with iron and cod-liver oil, porter, and with an occasional anodyne

* By Act. Asst. Surgeon H. McElderry, U. S. A.

to procure him a good nights rest. During the whole time the patient was subject to occasional attacks of diarrhœa, which would however quickly yield to simple treatment, to return it might be in three or four days. Towards the middle of November the matter, notwithstanding the bandage, was found to have dissected its way down the middle of the thigh under the fascia lata. An incision was made for the more complete discharge and a quantity of laudable pus made its escape. The patient about this time was troubled with a considerable degree of gastric irritation which subsided under the use of a little soda and hydrocyanic acid.

I saw him on the afternoon of the 19th: the wound was then discharging kindly, his appetite improving; indeed he was telling me how much he enjoyed his dinner. Thus far everything went on well.

The next morning on making my round I found him evidently dying. On closer inspection I discovered that he was lying in a lethargic state, as if from the effects of some narcotic poison, entirely insensible, respiration hardly perceptible, with a small and feeble pulse, pupils insensible and dilated and the temperature of the whole body much reduced. The nurse stated that he had suddenly been taken worse during the night with a fit after which it was found impossible to arouse him. He lay in this stupid state, had several convulsions and died during the morning, although every effort in the way of stimulating frictions, and injections of ammonia, and brandy and coffee, was used to arouse him.

An empty six ounce phial, marked "Solution of Morphia," and a box containing three powders, marked "Dover's powders," which had been put up by a certain druggist in the city and brought him the day before by a comrade in the same ward, were discovered near his bedside. The man who bought the medicines said that he had obtained them at the earnest solicitation of the patient; that the bottle had been one-third full and the box contained four powders. The nurse had also, at the patient's request, given him a dose of morphia the evening before.

Case reported by

II. McELDERRY,

A. A. Surg. U. S. A.

POST MORTEM.

Twenty-four hours after death.

Slight rigidity. Left thigh wounded and much larger than the right. A white puckered quadrilateral cicatrix on instep. Bed-sore on left part of sacrum.

BRAIN generally flaccid, cerebellum less so, and the membranes almost exsanguine, except that the superior vessels of pia mater were clearly marked. Pacchionian bodies more abundant on left summit. Small quantity of fluid in lateral and third ventricles. Floor of fourth ventricle marked with lines of congestion on the left side in the auditory tract and anteriorly in the approach to the right cerebellar ventricle. There were numerous vessels (puncta) which yielded comparatively large quantities of blood observed on transverse section of Pons Varolii. Although flaccid when taken in hand the brain was found quite consistent and easily examined. Weighed 2 lbs. 4 oz., length $7\frac{1}{2}$ inches.

LUNGS.—Numerous adhesions were found in right pleural sac. An amber colored jelly like lymph formation found among these. The pulmonary tissue was abnormally dense and friable, yielding on expression a frothy sanguineous fluid abundantly. It was thought that the appearance of the pulmonary tissue was a result of the statical action of pleuritic adhesions joined to long rest in one position and hypostasis dependent on the latter. Left lung generally similar. In the right pleura there were interlobar adhesions apparently more recent. Right weighed 1 lb. 10 oz., measured 8 inches; left weighed 1 lb. 2 oz., measured $7\frac{1}{2}$ inches.

HEART.—Liver presented generally a yellow color, especially inferiorly and superiorly, and there was vascular reticulation, as if from congestion about and between the acini. Under the capsule numerous minute pellucid bodies were observed and considered tuberculous, also minute yellowish specks corresponding to acini the cells of which were in a state of fatty degeneration. Tissue nutmegged on section and was apparently dense and not easily torn. Weighed 3 lbs. 10 oz., length 10 inches.

KIDNEYS of a pale color; substance firm, well developed. Weighed 4 oz.

SPLEEN.—Yellowish on dorsum, flaccid; substance of purplish color, exhibiting trabeculæ distinctly. Weighed 6 oz., measured $5\frac{1}{2}$ inches.

PANCREAS normal. Weighed $2\frac{1}{2}$ oz., length $7\frac{1}{2}$ inches.

Bronchial glands enlarged, containing blackish cortical substance and caseous and calcareous masses of a cream color.

INTESTINES.—Enlargement of solitary glands in ileum and small intestines generally. Valvulæ conniventes well developed. Fundus yellow. The mucous surface was pale; and the mucous membrane was readily scraped away.

WOUND.—Ball entered externally, near junction of upper and middle thirds of left thigh, passed upwards inwards and a little backwards, breaking the upper back part of the diaphysis and imbedding itself among the fragments, whence removed. A large mass of callus formed a discolored cavern there which opened downwards outwards and backwards, the surface of the cavern being covered with gelatiniform substance where not black, granular or exposed, or exhibiting puruloid fluid. The muscles had a watery look and exuded serum from section. Formation of adipose tissue in connective tissues of left lower extremity.

Gelatiniform substance was formed in the spinal canal, about the middle outside the theca.

[CASE No. 20.]

MICHAEL MELVEY, private Co. A, 2d Mass. Admitted September 10th, 1865; died September 22d, 1865.

By the culpability of a Cadet many of the most complete post-mortems made at "Hicks" Hospital in September, October and November were destroyed or lost and the following notes are those which remain.

HISTORY.—(ANTE MORTEM.)

The patient stated that he had been stationed in one of the southern states and had had an attack of fever from which he had a slow convalescence. Previous to being admitted he was attacked with dysentery. Pulse quick; appetite poor. He was somewhat emaciated and went to stool five to ten times daily, passing blood at each stool. The day after admission he was not so well and the number of his stools had increased.

September 12th.—Slightly improved.

September 14th.—Has improved but eats nothing and is very weak.

September 15th.—He is again worse. There is violent pain over the abdomen. Opium seems to have but little or no effect upon him but morphia gives relief.

The pain still continues. Discharges somewhat relieved by the constant use of morphia. He expired on the 22d of September, 1865.

Milk diet, revulsives, stimulants, anodynes and astringents constituted his treatment.

Case reported by

B. B. MILES,

A. A. Surg. U. S. A.

POST MORTEM,

Ten hours after death.

Decided rigidity. Medium stature. Emaciation.

BRAIN congested. In the pia mater there was an excess of fluid. Brain substance firm. On the floor of the fourth ventricle there were lines of congestion, larger on the left side in the mouths of the cerebellar ventricles. The pia mater (visceral arachnoid included) was torn in detachment from the summits of the hemispheres. Weighed 3 lbs., length $7\frac{1}{2}$ inches.

LUNGS.—A blackened region on the anterior surface of the upper lobe left lung; lower lobe darkened posteriorly. Near some old pleuritic bands on the upper part of the lower lobe beneath the pleura there were numerous blood spots. In some of the larger spots the effusion of blood was found to have involved the pulmonary tissue. These adhesions were of small extent and only observed at the back part of upper portion of lower lobe. Numerous and strong interlobar adhesions. Bronchial glands at roots of lungs of dark color though of normal size. A single mass of white caseous substance was found in upper back part of right lung. Very numerous old pleuritic bands in right pleural sac, principally on outer surface of lung. In extraction a portion of the parietal pleura was torn out with the visceral. Numerous ecchymoses were observed under the pleura over the whole surface of the lung, and between the lobes near the junction of the middle with the antero-posterior fissure. The middle fissure was incomplete and there were but two lobes in the right lung. Lung substance universally crepitant. Left lung weighed 11 oz., measured $7\frac{1}{2}$ inches; right weighed 1 lb., measured 8 inches.

HEART.—Firm white clot in right side, which was so attached to apex of ventricle and to tricuspid valve as to direct what blood could have passed during its existence upon the smooth approach to the pulmonary artery. Clot in left ventricle nearly black. Auricular septum imperforate. Weighed $9\frac{1}{2}$ oz., measured 5 inches.

LIVER.—General dark color. Grey spots in a dark base. Numerous formations of a yellowish color, generally somewhat

raised and presenting the appearance of minute clustered abscesses, were seen beneath the capsule. Puruloid fluid in considerable quantity escaped from the larger and more united of these clusters, of greyish color and considerable viscosity. Upon section of any cluster collections of pus were found. These varied from what could be contained in a sac the size of a pin's head to what could be held in one as large as a hazelnut. Still larger collections of viscid pus were met with in the centre of the organ. Gall bladder contained granular greenish bile. Weight of liver, 5 lbs. $\frac{1}{2}$ oz.

SPLEEN full and smooth, as if the capsule were firmly stretched over its contents. Substance very dark red, of rather firm consistence, readily pulped however. Weighed 15 oz., measured $6\frac{1}{2}$ inches.

KIDNEYS of light color, blackened inferiorly. Right weighed 5 oz., measured $4\frac{1}{2}$ inches; left weighed 6 oz., measured $4\frac{1}{2}$ inches.

SUPRA-RENAL CAPSULES.—In the right, upper portion, there was an elastic yellowish white substance. Cortical substance thickened, quite soft but breaking up granularly under pressure. On surface of left capsule two yellowish pellucid substances were met with, varying in size: the larger big as a grape seed, which broke up readily under pressure. They did not seem to be continuous with the substance of the organ. Left capsule darker than the right. Each weighed $\frac{3}{4}$ oz., measured 2 inches.

INTESTINES.—Duodenum presented a markedly mammillated appearance. Regional hyperæmia of jejunum. About half way down the ileum on the summits of the valvulæ conniventes on the side of the mesenteric attachment transverse ulcerations were observed, granulated, yellowish, thready, and superficial. Below where first observed they became very numerous and at the end of the ileum for a space of eight inches the whole surface of the intestine presented a similarly ulcerated appearance. In the midst of this space portions of surface presented a honey-combed appearance, and in these localities the mucous membrane had been perforated, muscular coat involved and walls of organ thickened. Ileo-cæcal valve greatly enlarged. The cæcum itself was enlarged and presented transverse lines of ulceration extending through mucous

membrane and involving at least the muscular coat. This ulceration was observed in ascending and transverse colon. In descending colon the ulcers became round, of large size, and so deep as to penetrate muscular and involve the fibrous coat. In sigmoid flexure and rectum ulcers were presented that involved the fibrous coat and the intestine had a feel as if its walls were less than normally tough. Upon holding the intestine up to the light the positions of the ulcers were indicated readily by the light spots.

[CASE No. 21.]

LEWIS A. NELSON, private Co. G. 5th Wis.; age, 20. Admitted July 24th, 1865; died September 30th, 1865.

HISTORY.—(ANTE MORTEM.)

Patient said he was wounded at Harpersville, Va., on April 6th, 1865. At the time of his admission into the Hospital the wound (which is in the left axilla and was evidently made while the arm was elevated) discharged large quantities of fetid pus which evidently came from the cavity of the chest. The wound closed up and the ball without doubt still remained in the cavity of the chest. There is no respiratory murmur over any part of left lung and it is evident that air does not enter it. He is able to sit up and walk about the ward but is very lean and weak. Treatment, tonics and stimulants. He had extra diet.

September 1st.—Patient has been gradually failing since last record. The quantity of pus discharged from wound is increasing and the odor is very offensive. He has some diarrhœa. Alvine evacuations fetid.

September 12th.—Strength fails rapidly and patient is unable to sit up; copious discharges from the wound still continue and also there is diarrhœa. Emaciation is extreme.

September 30th.—Patient died to-day, his body being reduced almost to a skeleton.

Case reported by

GEO. W. FAY,

A. A. Surgeon U. S. A.

—o—

POST MORTEM,

About twenty-four hours after death.

Extreme emaciation; anæmia. Œdema of lower extremities. Fetid pus poured from the wound of entrance during evisceration.

BRAIN.—Congestion of large vessels of pia mater. Large quantity of reddish fluid in lateral ventricles. Considerable sub-arachnoid fluid. Congestions of walls and summits of lateral ventricles. No congestion in third ventricle, although this too was full of fluid. Granular matter in the Pincal body. Nervous substance of normal consistence. No abnormality observed in the fourth ventricle. Weight of brain 47 oz., length $7\frac{1}{2}$ inches

LUNGS.—Right pleural sac nearly obliterated by bands, which were, however, readily torn. Bloody fibrous tissue appeared to be formed over the anterior and lateral surfaces of the lung after extraction. Strong inter-lobular connecting bands. Substance generally crepitant. Organ rather tumid. On section the inferior border posteriorly presented a dark red appearance, and in it there was a portion of tissue that had become solidified in such a way as to become tough. A section appeared speckled. Numerous red spots presented themselves in the midst of tissue generally yellowish. This speckling was not observed in the upper lobe. Left pleural sac contained a quantity of very offensive thin sanious pus. The internal surface of sac was thickly sheeted with formed lymph. Condition of lung itself was such that it was readily torn on extraction. It was very slightly crepitant in lower part of lower lobe and presented generally a beefy appearance

and a smooth dark colored section. Substance taken from lower portion of lower lobe floated in water, and the remaining substance, so far as it was examined, appeared to be of less specific gravity than water though indistinctly crepitant in places. The upper portion of lower lobe that was in relation wound described below, that involved the pleural sac in the vicinity of the angles of the fourth and fifth ribs, was of a darker color and of a greater specific gravity than water. This lung was functionally useless. Left weighed 8 oz., measured 7 inches; right weighed 14 oz., measured 9 inches.

HEART of small size, distended with mixed clots. Weighed 3 oz.

LIVER.—Substance of leaden color superiorly, deep red color inferiorly. Capsule opaque near middle superiorly, the opacity being in relation with some adhesions that connected the middle of right lobe with diaphragm. In the whitened region the capsule was thickened. Lead colored section; substance friable, exhibiting acini distinctly. There was a large quantity of amber colored bile in the gall bladder. Weighed 2½ lbs., measured 9 inches.

SPLEEN.—Normal in consistence, size and color. Weighed 6 oz., measured 5 inches.

KIDNEYS.—Right kidney small and firm; dark section. Left conspicuously mottled, presenting on anterior surface an angular yellowish surface near middle and posteriorly. Similar appearance inferiorly; on section nothing abnormal disclosed. Right weighed 3½ oz., measured 3½ inches; left weighed 3 oz., measured 3 inches.

SUPRA-RENAL CAPSULES firm, of normal size and general appearances.

PANCREAS normal; weighed 2 oz., measured 7½ inches.

INTESTINES.—Superficial ulcerations in the rectum; fine whitish granules observed in their tracts. Reddened places in the descending colon, generally oval in form, of indistinct outline and smooth surface which presented appearances of healing as if searred over. Similar ulcerations in transverse and descending colons and in the cæcum, chiefly disposed along the tracts of the longitudinal bands. Hyperæmia of colon and cæcum. Redness, discoloration and hyperæmia of the lower part of ileum. Slight thinning of intestines; yellowish or bile

discoloration. Jejunum well developed and generally of a light color. Stomach and duodenum normal.

WOUND.—Lateral portion of left lung was found torn and irregular and it was thought that this laceration had been caused in removal of the organ from the thorax. Ball entered at middle of posterior fold of axilla and passed inwards downwards and slightly backwards lodging between the laminæ of the fourth and fifth dorsal vertebrae, the point of the ball entering the spinal canal but not pressing upon or interfering with the theca. The pleural sac had been opened between the angles and heads of the fourth and fifth ribs, left side, and outside of this point of opening the callus had formed an arch between the angles so that the finger passed over a smooth surface in approaching from the outside the point of opening of the pleura. An incision was made during examination of the cadaver parallel with the base of the scapula through which the ball was readily extracted.

[CASE No. 22.]

JOHN DONNELLY, private Co. B, 1st Mass. H. A. Admitted on the morning of November 22d, 1865; died at 6 o'clock, A. M., November 23d, 1865.

HISTORY.—(ANTE MORTEM.)

On first seeing this patient I found him in a drowsy condition, so much so that it was with difficulty he could be sufficiently aroused to give his name, rank, etc.

The disease under which he was suffering was evidently Desquamative Nephritis. He presented an anasarcaous condition of the whole surface of the body, which was particularly noticeable in the penis and scrotum. The countenance was bloated and anemic. There was some dyspnœa which gradually increased during the day.

Two hours after admission he was taken with a sudden convulsion which was followed by others at intervals of from half

an hour to an hour. As these convulsions increased he became more and more comatose. During each convulsion he passed small quantities of urine. On testing with heat and nitric acid the urine was found to be albuminous. On microscopic examination epithelial scales, tubular casts, and a few blood discs were seen. In the treatment of this case very little was done as stimulants and all articles of nourishment were repeatedly rejected. Dry cupping over the lumbar region was resorted to. Death took place at 6 A. M. the following morning.

Case reported by

T. H. STUDDIFORD,

A. A. Surg. U. S. A.

POST MORTEM,

Thirty hours after death.

BRAIN.—Pia mater moderately ingested, especially at base of organ. One spot of ecchymosis superiorly posteriorly over the right hemisphere. Small quantity of limpid serum in sac of arachnoid. Pia mater was torn in shreds from the sulci. On summits of striated bodies, and their inner ventricular aspects, in the latitude of the foramen of Monro there were numerous minute ecchymoses, fine speckling as it were, apparently deep set in the grey substance. The ergots were found in sacs of their own and in disclosing them septums of lining membrane arching over the entrances of the posterior horns were cut through. An amber colored fluid was observed enmeshed and traversed by bloodvessels in these sacs proper. Both ergots were extraordinarily well developed. The walls of the ventricles presented a watery appearance and were readily broken through. On floor of fourth ventricle eight or ten lines of congestion well marked and associated with ecchymoses were observed. On the left side of the floor one of the superior origin bundles of the auditory nerve passed up making its exit at upper part of ventricle, not passing beneath inferior part of

left crus of cerebellum. Puncta throughout brain marked. The dentated body of the left cerebellum conspicuous. Brain weighed 3 lbs., measured 7 inches.

LUNGS.—The outer aspect of the left presented a pinkish color, inner aspect a purplish. Its tissue before section had a tough slightly erepitant feel, was evidently of high specific gravity and full of some kind of fluid. Slight erepitation was observed in every part examined by palpation. From a cut surface a quantity of sanguineous fluid a little frothy flowed on pressure. On such surface portions of pulmonary tissue were exhibited which were of a darker color and apparently more dense than the tissue surrounding, non-erepitant, and, when isolated, sank in water. Substance of the upper lobe had a dark watery carnified look and a great quantity of serum could be expressed. The left lung was œdematous in short.

The outer aspect of right lung was dark except that of the middle lobe and its inner aspect was pinkish. From a bleb on the diaphragmatic surface of the lower lobe a sanguineous fluid flowed on section. General characters of upper and lower lobes similar to those of left lung. Substance more filled with a fluid of a darker color and so dense that large portions when detached sank in water. Middle lobe of right lung was apparently more nearly normal, not partaking of œdema. Right weighed 2 lbs. 2 oz., measured 10 inches; left weighed 1 lb. 14 oz., measured 9 inches.

HEART of large size, firm substance. Weighed 13 oz., measured $5\frac{1}{2}$ inches.

LIVER of dark brown and purplish color. Substance on section of lead color, somewhat tough, yielding a marked liver odor. Gall bladder of yellowish green color, contained a small quantity of very fluid amber colored bile. Weighed 4 lbs., measured 11 inches.

SPLEEN of large size, purplish color and normal density. Weighed 1 lb., measured 6 inches. A small accessory spleen of the size of a hazel-nut was observed.

PANCREAS of dark color. Weighed $3\frac{1}{2}$ oz., measured $9\frac{1}{2}$ inches.

SUPRA-RENAL CAPSULES of pale color. Each weighed $\frac{1}{2}$ oz., measured 2 inches.

KIDNEYS.—In the lower part of the right kidney there was

a cyst of small size. Cortical substance of a pale color and well developed was readily torn in direction of the tubules. Specific gravity low. Left kidney similar to right in general characteristics. Right weighed 6 oz , measured $5\frac{1}{2}$ inches; left weighed $5\frac{1}{2}$ oz., measured 5 inches.

STOMACH large, fundus reddened. Duodenum discolored with bile. Ileum whitened: inferior portion was ironed and discolored with bile. Dark discoloration of cæcum and ascending colon and internal surface of large intestine throughout.

TABLE OF WEIGHTS

WEIGHTS.

No. of case.	Brain.	Lungs.		Heart.	Liver.	Gall-Bladder.	Spleen.	Kidneys.		Supra-renal Capsules.		Pancreas.	Intestines.
		Right.	Left.					Right.	Left.	Right.	Left.		
5	oz.	oz.	oz.	oz.	oz.	oz.	oz.	oz.	oz.	oz.	oz.	oz.	oz.
6		48½	55	11½	69		4½	7½	7½				58½
7	38½	26½	29	10			7	3½	4½				
8	47				71		9½	6	6			3	
9	45	12½	8½	6½	45		19	5½	6½				48½
10	53½	29	16½	9	48½		8½	6½	4½			3	
11		24	28	11½	77		3½	8½	9½				
12	47	18½	15	6½	45		15½					2½	
13	49	21	58	7½	64½		10	6	7½			3	
14	56	37	35	13	66		6	8	8			3½	78½
15	55	28½	15½	15½	91		13½						67
16		19	18		75		13½	6½	7			4	
17	49	72½	28½	14½	58½		7½	7½	8½			3	
18	48	37½	29	8½	71		7	6½	6½				
19	46	16	21	9½	61		7					4	
20	45	23	20	12	96		6	6	7	½	½	3½	60
21	51	12	15	12	64		7	5½	6			3	72
22	51½	24	22	11½			22	7	7				80½
23	60	14	13	10	46		6	5	5	¾	¾	2	
24	52	11	14	8	60		9	5	5½				
26	42	11	11	6	27		4	3½	3½			1	55
27		22	14	10	27		16	6	6			4	64
28	50	14	18	12	68		8	4	5			9	
29	57		28½	7½	80½		12	7½	7½			3½	75
30	48												
31	62	32½	28	12½	62		4	6	6½			2½	
32	52	2½	19	12½	82	2½	12	7½	8			3½	
33	51½	76½	44½	16	73		8½	8	7				
34	49	21		8	48		6	4	4			2½	
35	57	20	18	12½	59		10	5	4			3½	
36	51	32	21	11	68	2½		7	8			4	
37	38	23	18	9	41		4½	5½	4½				48½
38	52	38	31	10½	57		7½	4½	4½			2½	
39	52	28	26	10½	61		12½	4	5			3	
40	48½	18	9	11	51		6	4	5			3	
41	52	23	20	13½	54½		3½	3½	4½			2½	
42	51	24	25	9	76½		14	7½	6½			3½	64
43	45½	21	20	9	56	1½	5	4½	5½			3½	X
44	60	29	70	12	74		8	6	7½			4	68
45	45	25	17	8½	48	2	7	5½	4½			4	55
46	49	20½	15½	5½	28		3½	4	4			7	49
46	49	40	33	15½	63	2½	6½	5½	7½			3½	66
47	47½	22½	27½	14½	61	2	18	6½	7				76
48	44			11½	65	2½	14½	5½	5½			4½	
49	47	17	22	22	60	½	7½	6	6			3	68
50	50	28	25	9	44		17	7	5			4	62
51	42½	44½	21½	11	59		10½	6½	7			2½	64
52	55	18½	18½	9½	61½	2	9½	6	5½			2	

AND MEASUREMENTS.

MEASUREMENTS.

Brain.	Lungs.		Heart.	Liver.	Gall-Blad- der.	Spleen.	Kidneys.		Supra-renal Capsules.		Pancreas.	Intestines.
	Right.	Left.					Right.	Left.	Right.	Left.		
in.	in.	in.	in.	in.	in.	in.	in.	in.	in.	in.	in.	in.
7						6	5½	5½				
7½				11		7	5	4¾			9	
				9		6	5	4¾				
	8½	8½	4	6½		5½	4½	4½			6	
	8½	8		10		5½	5	5				
7½	9	8	3	9½		6½	5	5½			7¾	
7	8¾	9½	4½	10		5½	5	5			8	
7½	10	15	5	14½		4½	5	5			7	
8½	11	8½		12		5						
	7	7½		10		6	5	5				
7½	10½	10½	4	9½		6	5	5¾			8	
7½	10	9¾	4	11		9	5	6½				
7	9½	9½	5	11½		6½					8½	
7½	8½	6½	5	10½		6	4½	4½	2½	2½	8	
7½	8	8		10		6	7½	5½			7½	
7	8½	9	3½	9½		8	4½	5				
7½	7½	8	4½	9		4½	4½	5	2½	2½	6½	
7	7½	7	4	9½		5	5	5½				
7	9½	9	3½	8½		5	4	4			6	
	9	8	3½	8½		6	5	5			8	
6½	10	8½	5	11		5	4	4½			4	
7½		9	4½	11		6	5	5½			8	
7												
10	8½	8	3½	10		5½	4½	4½			7	
7	9	8½	3½	12		5	5½	5			8½	
7½		10	3½	12½		5½	5½	4½				
7½	8½		4	10		4½	4	4			6½	
7½	9	9	4½	10½		6	5	4			5	
7	10	9½	5	12		4½	5	5			9	
6½	8½	8½	4	10½		4½	5	4¾				
8	10½	11	4	11		5½	4½	4½			7½	
7	11	10	4	11½		6½	4½	4½			10	
8	9	7½	4½	11		4	5	5			8	
7	9	10	4	11		4	4	4½			8	
7	9	10	3½	12		8	5	5			8	
7	9	9	5	11		5	4	4¾			8	
8	10½	9	4½	12		4½	4	4½			9	
7	9½	9	4½	11		6	4½	4½			8½	
7	7½	7	3½	8		4	4	4			7	
7	11	9½	4	11		5½	4½	5½			7½	
7	8½	8	4½	11		8½	5	5				
7	10	10	5	11		7	4½	4½			6	
7	11	10	6½	11		5½	5½	5½			6	
7	10	9	4½	10		7	5	4½			7	
7	9	9	4½	11			5	5½			8½	
7	9	9	5	11½		1	5	5			8½	

WEIGHTS.—Continued.

No. of case.	Brain.	Lungs.		Heart.	Liver.	Gall-Bladder.	Spleen.	Kidneys.		Supra-renal Capsules.		Pancreas.	Intestines.
		Right.	Left.					Right.	Left.	Right.	Left.		
53	oz.	oz.	oz.	oz.	oz.	oz.	oz.	oz.	oz.	oz.	oz.	oz.	oz.
54	47	28	31	15	72	1½	8	5¼	6			2½	
55	51½	12½	15½	11	69		43	6¼	7			4½	67
56	42	33	31	11	59	3½	7	4	3½			3	52
57	47	32	27	13	47		5	5	5¼				
58	57	56	29	14½	84	1¾	11	5	5			4¾	
59	54½	23	22	16	78	2	16	5	5			5	58
60	49	19	24	8½	82	6½	9	6	5	¼	¼	5	

ADDITIONAL CASE PART II.

[CASE No. 23.]

WALTER FORD, corporal Co. B, 1st U. S. Col. Inf't'y; age 20. Admitted July 24th, 1865, from McKim's U. S. General Hospital, Baltimore, Md.

HISTORY.—(ANTE MORTEM.)

Patient suffered with a gun-shot wound of left thigh. The ball had entered posterior part of outer aspect of middle third of thigh, passing inwards forwards and slightly upwards, and lodged. It was sought for several times but could never be detected. A large detached piece of necrosed bone was taken out of the opening of entrance during the month of September, 1865. The patient complained of continual pain aggravated by pressure in both lumbar regions in which regions there was extended flatness on percussion.

Patient continued very weak, had several attacks of erysipelas and finally sank after a severe attack, February 20th, 1866.*

Case reported by

H. McELDERRY,

A. A. Surg. U. S. A.

* The left thigh was greatly swollen, its skin shiny and somewhat tuberculated about sinuses and slow healing incisions. The diagnosis of fatty degeneration (interstitial formation and proper) was made for the left thigh and leg and inferred for the great organs. Ford was a

MEASUREMENTS.—Continued.

Brain.	Lungs.		Heart.	Liver.	Gall-Bladder.	Spleen.	Kidneys.		Supra-renal Capsules.		Pancreas.	Intestines.
	Right.	Left.					Right.	Left.	Right.	Left.		
in.	in.	in.	in.	in.	in.	in.	in.	in.	in.	in.	in.	in.
7			5½	10½		5½	4½	4			9	
7½	9	8½	5½	11½		9	5	5			9	
7	8	9	5	10		5	4½	4				
7	10	9	5	11½		6	4½	4½			10	
7		10	5½	12		6	5	5½				
8	11	10½	6	11		5	6	5½			8	
7	9	9	5½	12		8½	5	4½	2	1½	8	
8	9	9	4½	11		5	5	5½			7	

POST MORTEM,

BRAIN AND SPINAL CORD.—Fluid in sac of arachnoid. Pia mater ingested. Central canal of spinal marrow visible. Fluid in lateral ventricles. Weight of brain 46 oz., length 7 in., width 5½ inches.

LUNGS congested, mottled, flaccid. Right lung weighed 19 oz., measured 7 inches; left weighed 15 oz., measured 7 inches.

HEART.—Fatty degeneration proper of the muscle of the heart. Fat globules of various sizes, generally extremely minute, one seventeen thousandth part of an inch for instance. Tendency to longitudinal splitting and lining. Transverse lining barely recognizable. Weighed 10 oz., length 4½ in., width 2½ inches.

LIVER of large size, light red superiorly, somewhat mottled and of a darker color inferiorly; congested on anterior border inferiorly. The gall bladder was full of viscid dark brown bile. Great numbers of oil globules were observed in the cells of this organ. Power of three hundred and forty diameters. Weighed 4 lbs. 6 oz., length 11½ in., width 8 inches.

SPLEEN of a light red color externally darker internally. Numerous minute whitish translucent granules were observed in its substance and the centres of these became bluish under

long time dying: for seventy hours or more his death was expected from hour to hour. Before death the surface of his body in appearance was warm. The left leg and foot were gangrenous.

the iodine test. In this organ irregular dark hæminic masses were observed; and granules. Weighed 10 oz., length 5 in., width 4 inches.

KIDNEYS of large size, mottled yellow black and red; of low specific gravity; very yellow cortical substance. Under the microscope granule globules, free fat globules, and a markedly granular condition of the cells generally was observed. In the cells of the renal glomerules there were large round or regularly oval nuclei with bright round nucleoli (fat formed in the germinal matter?) and the cells were markedly granular. Some granule globules were seen breaking up. Right kidney weighed 18 oz., length $6\frac{1}{2}$ in., width 4 inches; left weighed 19 oz., length $6\frac{1}{2}$ in., width $4\frac{1}{2}$ inches.

INTESTINES.—Descending colon and sigmoid flexure mottled, generally of a dark color; some hyperæmia. Peyer's patches congested. Hyperæmia of lower portion of ileum; above this a region of dark discoloration succeeded by greenish discoloration throughout the jejunum. Greater curvature of stomach discolored.

WOUND.—There was tumor (result of periosteum action) of the diaphysis of the left femur. Ball (much flattened) was found beneath the sartorius muscle and vessels; in the middle third of the thigh. Pus in left knee joint, in left hip joint, and in the superficial fascia of the left leg. No disease of the vessels observed.

LYMPHATICS.—Pigmentary deposit in the glomeruli of one of the mesenteric glands. In this same gland the capillary vessels could be traced far, without special preparation, between glomeruli. Bodies resembling white corpuscles of the blood were numerous and plainly visible.

BLOOD.—White corpuscles were observed to be five to ten times as numerous as they should have been, having very distinct granulation; presenting nucleoid bodies, some corpuscles three some two and some one, large and plain. Drawings of them preserved.

NOTE.

The preceding pages are not given forth as perfect in any way. I am sensible of many shortcomings in conception and execution. Microscopic observations, often made, were, as a rule, made so imperfectly as not to be deemed proper to record. What I have seen I have described; and the majority of observations made in public, as it were, with an audience of from five to ten persons having more or less professional knowledge were assented to by all present. Every statement was made with the part described in hand or before me and written down generally by a cadet according to dictation. The language of dictation has been preserved, as may be seen. *

I do not consider myself in the least responsible for the Antemortems. They are given for the most part precisely as composed by the medical officer whose name is attached.

I am indebted to the cadets and students of medicine at National and Hicks Hospitals for zealous co-operation.

It is my painful duty to say a word in memory of Mr. Caulk, a young gentleman of high promise, a student of medicine at the University of Maryland, who, after assisting us in our examination of the bodies of so-called "spotted fever" cases at National Hospital, himself contracted this disease and died of it.

I am indebted to Dr. Henry McElderry, U. S. Army, for compiling the first table of weights and measures.

The greatest allowance should be made for typographical errors. I am indebted to J. S. Clarke and William Beek, the printers, for their diligence and general accuracy.

This book is only a printed note-book intended for the [Surgeon General's Office and for the officers of National and Hicks Hospitals, who have desired copies. Criticism upon it, therefore, would be wholly out of place.

GEORGE M. MCGILL,

Brevet Major & Asst. Surgeon U. S. A.

INDEX.

Case.

PART I.

1. Pyæmia.
- 2. Perforation of Cæcum; Pneumonia.
- 3. "Spotted Fever." *g-12*
- 4. Chronic Diarrhœa.
- 5. Phthisis.
6. Fracture of the Skull.
- 7. Hepatitis (abscess of liver.)
- 8. Pneumonia; Congestion of the Brain.
9. Amputation in Left Thigh; Diarrhœa.
- 10. Pleurisy.
11. Typhoid Fever?
12. Congestion of and Blood Effusion in the Mucous Membrane of Small Intestines.
- 13. Pneumonia.
- 14. Typhoid Fever.
15. Fracture (scolopetic) of head of Right Femur; Congestion of Brain.
- 16. Tuberculosis.
- 17. Pneumonia.
18. Lobular Pneumonia; Serous Effusion. *apophary Brain*
- 19. Congestion of the Brain; "Spotted Fever?" *20-22*
20. Gun-shot Wound of Left Lung.
- 21. Pneumonia and Pleurisy.
22. Gun-shot Wound of Pelvis; Pyæmia.
23. Chronic Diarrhœa? Adhesions in serous;
24. Chronic Diarrhœa.
25. Gun-shot Wound Right Lung.
- 26. Cancer of Descending Colon; Congestion of the Brain.
27. Pyæmia; Congestion of the Brain.
28. Gun shot Wound of Spine; Hemorrhage from Spinal Veins.
- 29. Pyæmia, after primary amputation mid. third left thigh.
30. Fracture of the Skull, R. R.
- 31. Diphtheria.
- 32. "Spotted Fever." *bulg*
- 33. Pneumonia.
- 34. Pneumonia, Parotitis.
- 35. Congestion of Lungs and Brain.
- 36. Typhus Fever? Pneumonia; parotitis complicating.
- 37. Tuberculosis.
- 38. Congestion of Lungs. Heterologous (bone) tumor in brain. Aneur-
ism in basilar artery.
- 39. Spotted Fever? Typhus? *Brain to*
40. Gun-shot Wound Spleen and Lung.
- 41. Spotted Fever? Typhus? *Amulcine*
- 42. Pneumonia; Congestion of the Brain.

Case.

43. Spotted Fever? *Brown*
44. Pneumonia.
45. Chronic Diarrhœa.
- 46, 1st. Chronic Diarrhœa.
- 46, 2d. " "
47. Spotted Fever? *W. Smith*
48. Congestion of Lungs and Brain, etc.
49. Ligature of Femoral and External Iliac Arteries.
50. Congestion of Brain and Lungs. *B. Smith*
51. Cerebro-spinal Meningitis. *M. Smith*
52. Gunshot Wound of Pelvis; pyæmia.
53. Congestion of the Brain and Lungs. *C. W.*
54. Typhus? *B. Smith*
55. Spotted Fever. *W. Smith*
56. Tuberculosis.
57. Gun-shot Wound of Spinal Marrow.
58. Pneumonia.
59. Capillary Bronchitis; disease of œsophagus.
60. Pneumonia, etc.

PART II.

1. Typhoid Fever.
2. Abscesses of Liver. *connected with dysentery.*
3. "Typho-Malarial?"
4. Chronic Diarrhœa; peritonitis.
5. Pyæmia, after amputation of left arm.
6. Gun-shot Wound of Left Femur.
7. Gun-shot Wound of Left Leg; Fatty Degeneration.
8. Tuberculosis.
9. Typho-Malarial Fever.
10. Tuberculosis; Diarrhœa.
11. Pneumonia.
12. Dysentery.
13. Tuberculosis; Dysentery.
14. Pleurisy.
15. Congestion of Lungs and Brain, (after a debauch.)
16. Typho-Malarial Fever; pneumonia.
17. Congestion and ecchymosis in 4th ventricle; melanosis, etc., following malarial disease.
18. Coxalgia.
19. Gun-shot Wound of Left Thigh; death from poisoning by Morphia?
20. Chronic Diarrhœa; abscesses in liver; pyæmia.
21. Gun-shot Wound, penetration of left pleural sac, etc.,
22. Desquamative Nephritis.
23. Gun-shot Wound of Left Thigh; fatty degeneration. Fatty degeneration of kidneys.

